

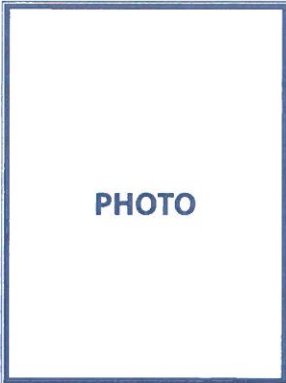


**PERSATUAN KEBANGSAAN USAHAWAN WANITA MALAYSIA  
NATIONAL ASSOCIATION OF WOMEN ENTREPRENEURS OF MALAYSIA**

Lot 13, Rumah Puspanita, 5171 JKR, Jalan Hose, 50460 Kuala Lumpur, Malaysia. Tel: 03-2142 3325 Fax: 03-2148 5955  
E-mail : sekretariat@nawem.org.my Website : www.nawem.org.my

# MEMBERSHIP APPLICATION

(Please use block letters only to fill in this form)



## 1. PERSONAL PARTICULARS

Name \_\_\_\_\_  
 \_\_\_\_\_  
 Puan Sri / Datin / Dr / Ms /Mrs / Mdm\* \_\_\_\_\_  
 Home Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 City / Area \_\_\_\_\_ Postcode \_\_\_\_\_  
 State \_\_\_\_\_ Country \_\_\_\_\_  
 NRIC No. (Old) \_\_\_\_\_ (New) \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ (dd/mm/yy) Place of Birth \_\_\_\_\_  
 Marital Status : Single / Married /Divorced / Widowed\* Nationality \_\_\_\_\_  
 Tel (Home) \_\_\_\_\_ H/P \_\_\_\_\_  
 Pager \_\_\_\_\_ Code \_\_\_\_\_  
 E-mail \_\_\_\_\_

\* Delete where not applicable

## 2. BUSINESS PARTICULARS Own Business Employee Others (Please Specify.....)

Name of Company / Business \_\_\_\_\_  
 Business Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 City / Area \_\_\_\_\_ Postcode \_\_\_\_\_  
 State \_\_\_\_\_ Country \_\_\_\_\_  
 Tel (Office) (1) \_\_\_\_\_ (2) \_\_\_\_\_  
 Fax \_\_\_\_\_ E-mail \_\_\_\_\_  
 Position in Company \_\_\_\_\_  
 Nature of Business \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Year Business Started \_\_\_\_\_ Paid-Up Capital\* \_\_\_\_\_  
 No. of Employees \_\_\_\_\_ Equity Held\* \_\_\_\_\_

\* Please attach relevant documents

Mailing Address  Residence  Business

### 3 Qualifications (Academic, Professional or Trade Memberships and Affiliations)

### 4 Business Experience

### 5 Membership Grade

I wish to apply for the following category : (Please Tick)

Years in Business	Grade	Annual Fee	Life	Charter
<input type="checkbox"/> 5 years & above	<input type="checkbox"/> Guild	<input type="checkbox"/> RM 300	<input type="checkbox"/> RM 2000	<input type="checkbox"/> RM 500
<input type="checkbox"/> 2 years – 5 years	<input type="checkbox"/> Ordinary	<input type="checkbox"/> RM 200	<input type="checkbox"/> RM 2000	<input type="checkbox"/> RM 500
<input type="checkbox"/> Less than 2 years	<input type="checkbox"/> Associate	<input type="checkbox"/> RM 100	-	<input type="checkbox"/> RM 500
<input type="checkbox"/> Sole Proprietor or Employee	<input type="checkbox"/> FON*	<input type="checkbox"/> RM 100	-	-

FON\* - Friends of NAWEM

### 6 Please enclose all required documents to expedite approval :

1. One Passport – Size Photograph
2. For Sendirian Berhad
  - Form 24 (all copies), Form 49 (latest copy), and latest copy of Annual Returns, duly certified by Company Secretary.
3. For Sole Proprietor
  - Business Registration and Borang D
4. Your cheque made payable to "NAWEM" and crossed "A/C PAYEE ONLY" for :

Registration Fee	RM 100	
Life / Charter*	RM	
Guild / Ordinary / Associate*	RM	(Annual / Half /Annual Fee)*
FON	RM	Bank
Total Payable	RM	Cheque No.

\*Delete where not applicable

5. Your current Name Card(s)

**NOTE :** (1) Application submitted after July 1 need only pay half of Annual Membership Fee.

(2) Please submit your application together with ALL relevant documents to the Secretariat Office.

- 7 Proposer Membership No.
- Seconder Membership No.

- 8 I declare that the particulars stated above are true. If my application for membership is accepted, I agree to abide by all the rules and regulations as stipulated in the BY-Laws and the Constitution of the Association.

Date

Applicant's Signature

FOR OFFICE USE ONLY	
Receipt No :	Date Received :
Cash / Cheque :	Date Approved :
Amount :	Membership No.
	Vice President Membership