



MEMBERSHIP APPLICATION FORM
(Confidential)

AFFIX
PHOTO
HERE

APPLICATION FOR COMPANY MEMBER/ORDINARY MEMBER/STUDENT MEMBER*
(Only Ordinary Members can apply for upgrade to Associate Member/Corporate Member/Fellow Member. Please Request for the relevant application form from the IMM Secretariat)

(I) FOR ORDINARY MEMBERSHIP (STUDENT MEMBERS ALSO TO FILL UP THIS PART)

PERSONAL PARTICULARS (photocopy of I.C./Passport to be submitted)

NAME IN FULL (MR/MS/DR/.....): _____
(BLOCKS LETTERS)

RESIDENCE/POSTAL ADDRESS : _____

TELEPHONE NO : HOUSE _____ HANDPHONE NO: _____

PLACE OF BIRTH : _____ DATE OF BIRTH : _____

NATIONALITY : _____ PASSPORT/I.C. NO : _____

QUALIFICATION : _____

NAME OF EMPLOYER/COMPANY

TITLE OR POSITION : _____

ADDRESS : _____

TELEPHONE NO : _____ FAX NO : _____ E-mail : _____

(II) COMPANY MEMBERSHIP (COMPANY PARTICULARS)

COMPANY NAME: _____

COMPANY REGISTRATION NUMBER : _____

ADDRESS : _____

TELEPHONE NO : _____ FAX NO: _____ E-mail : _____

PRINCIPAL REPRESENTATIVE (MR/MS/DR/.....) :

AFFIX PHOTO HERE

ALTERNATE REPRESENTATIVE (MR/MS/DR/.....) :

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POSITION:

POSITION:

(III) FOR STUDENT MEMBERSHIP ONLY

COURSE OF STUDY : _____ YEAR OF STUDY : _____

NAME OF UNIVERSITY/COLLEGE : _____

ADDRESS : _____

TELEPHONE NO: _____ FAX NO: _____

The above student is allowed to join the Institute

Signed : _____

Name : _____

Designation : _____

University/College Chop

Date: _____

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INDICATE INDUSTRY INVOLVED OR INTERESTED IN :-

METALLURGY	()	CORROSION PROTECTION	()
MATERIALS FAILURE	()	COMPOSITE MATERIALS	()
MATERIALS DESIGN	()	CONCRETE TECHNOLOGY	()
MATERIALS RESEARCH	()	WOOD TECHNOLOGY	()
POLYMER TECHNOLOGY	()	EDUCATIONAL INSTITUTION	()
CERAMICS TECHNOLOGY	()	OTHERS (SPECIFY)	_____
WELDING	()		

I/We hereby accept responsibility for the accuracy of the particulars contained in this application form.

Date : _____

Signature : _____
(and Company Stamp)

Proposer : _____
Name : _____

Secunder : _____
Name: _____

Membership Grade & No: _____

Membership Grade & No: _____

* Delete whichever not applicable.

NB : If proposer and secunder cannot be sourced, mail this form to the Secretariat for assistance.

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ENCLOSED IS MY/OUR CHEQUE/BANK DRAFT/MONEY ORDER NO: _____
FROM BANK _____ FOR THE AMOUNT OF _____
RM _____

Signature : _____

Name: _____