

INDIVIDUAL MEMBERSHIP EQUESTRIAN ASSOCIATION OF MALAYSIA



CONTACT INFORMATION

New Application Renewal

All e-mail correspondence from EAM will be sent to the following:

Full Name			
Address			
Date of Birth		I/C or Passport Number	
Nationality			
Mobile No.			
E-mail			
EAM Membership Number		Signature	

I hereby agree to abide by the Rules and Regulation of EAM and to respect and enforce all decisions of EAM.

With Group Personal Accident
Policy (Additonal RM 60.00)

TYPE OF APPLICATION (✓)

Without Group Personal Accident
Policy

Annual Subscription 20 _____ (RM 100.00/year)		Annual Subscription 20_____ Junior below 20 years old (RM 50.00/year)	
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All payment can be made at: CIMB Bank (8002483157) under account Equestrian Association of Malaysia.

FOR OFFICE USE ONLY

Date Received :
 Membership Years :
 Membership No. :