



APPLICATION FOR RENEWAL OF MEMBERSHIP

PARTICULARS OF MEMBER *(update where necessary)*

PERSONAL INFORMATION

FULL NAME : _____

TITLE : _____ NRIC/PASSPORT NO. : _____

DATE OF BIRTH : _____ AGE : _____

CORRESPONDENCE ADDRESS : _____

MOBILE PHONE NO. : _____ HOUSE PHONE NO. : _____

EMAIL ADDRESS : _____

IMM MEMBERSHIP NO. : _____

CURRENT JOB INFORMATION

NAME OF COMPANY : _____

DESIGNATION/POSITION : _____

ADDRESS OF COMPANY : _____

OFFICE PHONE NO. : _____ OFFICE FAX NO. : _____

MEMBERSHIP SUBSCRIPTION AND PAYMENT

GRADE (Thick the appropriate box) SUBSCRIPTION PERIOD

Fellow (F.I.M.M.) 1-year

Professional (M.I.M.M.) More than 1-year, please state : _____ years

Associate (A.M.I.M.M.) Amount paid : _____

Company

Ordinary

MEMBERSHIP ANNUAL SUBSCRIPTION FEES SCHEDULE

Description	Amount (RM)				
	Fellow (F.I.M.M.)	Professional (M.I.M.M.)	Associate (A.M.I.M.M.)	Company	Ordinary
Annual Subscription	150.00	100.00	80.00	200.00	50.00

PAYMENT

Payment can be made by cheque, telegraphic transfer, bank draft, cash deposit machine or via online/internet banking as follows:

Account Name : Institute of Materials, Malaysia
Account : 8009055156
Bank : CIMB
Swift Code : CIBBMYKL

SUBMISSION OF DOCUMENTS

Send your completed form together with the proof of payment either via email to **secretariat@iommm.org.my** or WhatsApp to **018- 9113480** or send by courier/post to:

The Secretariat
Institute of Materials, Malaysia
Suite 1006, Level 10, Block A,
Kelana Centre Point (Lobby A),
No.3, Jalan SS 7/19, Kelana Jaya
47301 Petaling Jaya, Selangor

FOR OFFICE USE

Reviewed by,

Name : _____
Date : _____