



Vision: To be the leading development platform for entrepreneurs Malaysia, and globally
Mission: To develop an ecosystem that inspires and grow Malaysian entrepreneurs and the community; to bridge, guide and share best business practices with aspiring entrepreneurs

Pls affix three passport size photographs

MEMBERSHIP APPLICATION FORM (SABAH STATE LIAISON)

PERSONAL DATA

MEMBERSHIP NUMBER _____

*NAME IN FULL _____ *CHINESE NAME _____ *NATIONALITY _____
 *NRIC / PASSPORT NO _____ *DATE OF BIRTH _____ *MARITAL STATUS SINGLE MARRIED
 *RESIDENCE ADDRESS _____ *GENDER MALE FEMALE
 *HOME TEL _____ *H/P 1 _____ *H/P 2 _____ FAX _____
 URL _____ *EMAIL _____
 * () I would like to receive PUMM news via email

PROFESSION / TRADE

*NATURE OF BUSINESS _____
 *POSITION _____ *PRODUCT & SERVICES _____
 *COMPANY NAME _____
 *COMPANY ADDRESS _____
 *OFFICE TEL _____ FAX _____ URL _____
 *EMAIL _____

MEMBERSHIP FEES

REGISTRATION FEES (Compulsory) RM 100.00
 LIFE MEMBER (LM) RM 3000.00

TOTAL PAYMENT RM 3,100

PAYMENT

ENCLOSED HERE WITH CHEQUE

CHEQUE NO. _____ AMOUNT _____

Made Payable to :

**PERSATUAN USAHAWAN MAJU MALAYSIA
 PUBLIC BANK BEHAD : 3202315606**

For direct bank in, kindly return bank in slip as proof of payment. Please email to jeff@ga.com.my

* Note: Deposit paid is non-refundable

PLEASE FILL UP EVERY COLUMN STATED WITH *

DECLARATIONS

I confirm that all the above information is true and correct and I hereby agree to adhere to the rules & regulations of the association.
 I declare that I am not a bankrupt and I have never jailed for more than one year by any Malaysia court and never been fined for more than RM 2,000.00.
 I fully understand that the Board of Committee reserves all right to terminate and / or reject my application at any time for misconduct and / or failure to comply with the rules and regulations set out thereof.

 SIGNATURE OF APPLICANT
 DATE :

FOR OFFICE USE ONLY

NAME OF PROPOSER _____
 MEMBERSHIP NO. _____

NAME OF SECONDER _____
 MEMBERSHIP NO. _____

 SIGNATURE

 SIGNATURE

DATE RECEIVED _____

DATE OF EXCO MEETING _____

APPLICANT INFORMED DATE _____

MEMBERSHIP NO. _____

PUMM Headquarter	• A-11-01, Plaza Bukit Jalil (Aurora SOVO), Bandar Bukit Jalil, 57000, Kuala Lumpur. • T: 017-630 5132	E: pummki@gmail.com W: www.pumm.my
PUMM Perak State Liaison	T: (6012) 615 6888	E: pummperak@gmail.com
PUMM Penang State Liaison	T: (6019) 558 2005	E: pummpg@gmail.com
PUMM Johor State Liaison	T: (6014) 914 0890	E: pummjohor@gmail.com
PUMM Pahang State Liaison	T: (6012) 355 2533	E: pummpahang88@gmail.com
PUMM Selangor State Liaison	T: (6012) 787 3133	E: pumm.selangor@gmail.com
PUMM Sabah State Liaison	T: (6016) 844 2928	E: jeff@ga.com.my
PUMM NS State Liaison	T: (6017) 630 5132	E: pummki@gmail.com
PUMM Melaka State Liaison	T: (6018) 294 8687	E: woanyi7900@gmail.com