



马来西亚华人公会
MALAYSIAN CHINESE ASSOCIATION

成立新支会申请书

APPLICATION FOR THE
ESTABLISHMENT OF A NEW BRANCH

总部组织局专用栏 For MCA HQ Use Only

1 支会名称(中):
Name of Branch (English):

2 支会地址:
Address: 邮区: Postcode:

3 拟设立之支会是在 州议会选区
The proposed Branch is located at State Constituency
及 国会选区之范围内。
of Parliamentary Constituency.

4 拟设立之支会地区内, 华人口大约有 人,
Estimated number of Chinese popuolaion in the constituency ,
华裔选民大约 人。
Chinese Voters

5 最靠近之支会名称:
Name of nearest Branch :
(最靠近之支会如拟设立之支会有任何意见, 可在区委员会会议提出.)
(Any comments on the establishment of the proposed Branch by the nearest
branch can be made at the Divisional Committee meeting.)

6 5名发起人(必须来自有关区会):
Name of 5 proposers on the formation of the proposed Branch:
(Must be from the Division Concerned)

支会名称:
Branch Name:

支会编号:
Branch Code:

收到申请书日期:
Date Received:

区会意见: 支持 反对
Divisional Comment: Support Object

日期:
Date:

区联委会意见: 支持 反对
State LC's Comment: Support Object

日期:
Date:

提呈会长理事会日期:
Date Table to Presidential Council Meeting:

批准 不批准
Approved Not Approved

1 中文姓名: 英文姓名: 新/旧身份证号码:
Name in Chinese: Name in English: New/Old Identity Card No.
通讯地址:
Correspondence:
Address: 邮区: 电话:
Postcode: Telephone No.:
党员证号码: 发起人签署:
MCA Membership No.: Signature of Proposer:

2 中文姓名: 英文姓名: 新/旧身份证号码:
Name in Chinese: Name in English: New/Old Identity Card No.
通讯地址:
Correspondence:
Address: 邮区: 电话:
Postcode: Telephone No.:
党员证号码: 发起人签署:
MCA Membership No.: Signature of Proposer:

3 中文姓名: 英文姓名: 新/旧身份证号码:
Name in Chinese: Name in English: New/Old Identity Card No.
通讯地址:
Correspondence:
Address: 邮区: 电话:
Postcode: Telephone No.:
党员证号码: 发起人签署:
MCA Membership No.: Signature of Proposer:

4 中文姓名: 英文姓名: 新/旧身份证号码:
Name in Chinese: Name in English: New/Old Identity Card No.
通讯地址:
Correspondence:
Address: 邮区: 电话:
Postcode: Telephone No.:
党员证号码: 发起人签署:
MCA Membership No.: Signature of Proposer:

5 中文姓名: 英文姓名: 新/旧身份证号码:
Name in Chinese: Name in English: New/Old Identity Card No.
通讯地址:
Correspondence:
Address: 邮区: 电话:
Postcode: Telephone No.:
党员证号码: 发起人签署:
MCA Membership No.: Signature of Proposer:

7 申请日期:
Application Date:

8 区会/州联委会意见(请在适当的空格里画√)
Consent of State/Division (Please mark "√" in the appropriate box below)

附上区会推荐函 附上州联委会推荐函 区会/州联委会尚未提呈推荐函
Letter of Consent From Divisional is Letter of Consent From State Liaison No Letter of Consent From State &
Enclosed Herewith Committee is Enclosed Herewith Division

* 此表格必须填呈四份
THIS FORM MUST BE COMPLETED IN FOUR COPIES.