

党员会费缴交表格
Membership Subscription Form

To : **Membership Department**
8th floor Wisma MCA
163 Jalan Ampang
50450 Kuala Lumpur
Tel: 03-2203 3888
Fax:03-2203 3820

Name : _____ 姓名 (中) : _____
New I/C No : _____ Old I/C No : _____
身份证号码 (新) : _____ 身份证号码 (旧) : _____
Membership No : _____
会员证号码 : _____
Amount : _____
数额 : _____

Mode of Payment (付款方式) :

: Cash 现金
 : Cheque No 支票号码: _____ Bank 银行: _____
 : Postal Order No 邮政汇票号码: _____

For office use only: Received Date : _____ Checked by : _____ Receipt No : _____	Mode of Payment: <input type="checkbox"/> Cash _____ <input type="checkbox"/> Cheque No _____ <input type="checkbox"/> Postal Order _____
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