

Introducer's Name & Membership No.

BRITISH GRADUATES ASSOCIATION, MALAYSIA  
 PERSATUAN GRADUAN-GRADUAN BRITISH, MALAYSIA

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_ POSTCODE \_\_\_\_\_

IC NO. \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

TEL. \_\_\_\_\_ MOBILE PHONE \_\_\_\_\_

COMPANY NAME & ADDRESS \_\_\_\_\_

\_\_\_\_\_ POSTCODE \_\_\_\_\_

DESIGNATION \_\_\_\_\_ EMAIL \_\_\_\_\_

OFFICE TEL. \_\_\_\_\_ FAX \_\_\_\_\_

Passport size Photo



15B, Jalan SB Indah 1/18  
 Taman Sungai Besi Indah, 43300 Seri Kembangan  
 Selangor Darul Ehsan, Malaysia  
 Tel: +603-8942 6278  
 Email: bgamfb@gmail.com  
 Website: www.bgam.org.my  
 Facebook: BGAM  
 (British Graduates Association Malaysia)

**Academic qualification (please attach photocopy of certificates with this application)**

YEAR GRADUATED	UNIVERSITY / COLLEGE	DEGREE OBTAINED	DISCIPLINE / COURSE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Professional qualification / membership of other associations / alumni**

YEAR OF JOINING	ESTABLISHMENT / ASSOCIATION / ALUMNI / CLUB	POST HELD
_____	_____	_____
_____	_____	_____
_____	_____	_____

Area of interests of which you would like to participate in this Association.  
 (Tick one or more options. For OTHERS, please specify)

- Golf     
  Charity     
  Games     
  Debates     
  Treasure Hunt  
 Seminars     
  Fellowship     
  Others     
 \_\_\_\_\_

**Application for Life**

Membership category & subscription rates     
 LIFE MEMBERSHIP – Ringgit 100.00 (one time payment only)

Please make cheque payable to **BRITISH GRADUATES ASSOCIATION** or online payment to  
 MAYBANK ACCOUNT: 014 299 102 708  
 15B, Jalan SB Indah 1/18, Taman Sungai Besi Indah, 43300 Seri Kembangan, Selangor Darul Ehsan, Malaysia  
 Tel: +603-8942 6278      Email: [bgamfb@gmail.com](mailto:bgamfb@gmail.com)

Declaration: I hereby declare that all the above information which I have given are accurate and true. If the above information is found to be inaccurate or untrue, then BGAM will have the right to terminate my membership.

Date \_\_\_\_\_ Signature \_\_\_\_\_

**Office use only**

Application status     
 APPROVED     
 REJECTED     
 Membership No.:

Certified by \_\_\_\_\_ Approved by \_\_\_\_\_ Recorded by \_\_\_\_\_

- Hon Secretary     
 Membership Committee Chairman     
 President  
 Hon Asst Secretary     
 Deputy President