## **MEMBERSHIP FORM**



## Koperasi Usahawan Inklusif Malaysia Berhad (KUIMB)

Personal	l Informatio	on							
Full Name :									
ID Number :				Date Of Birth	:	D D	M M	YY	
Full Address :									
Phone Number :				Gender	:				
E-Mail :				Marital Status	:				
■ Nomine	e Informati	on							
Full Name :									
ID Number :				Phone Number	:				
Relationship : with Applicant				E-Mail	:				
Full Address :									
■ Bank De	tails								
Bank :				Account Number:					
Member	ship & Shai	eholder Cor	nfirma	ation					
To <b>Mi</b> r		become a Shareholder: n Number of Shares: shares (RM 5,000)		1. Applio 2. Meml Coopera	Please attach the following:  1. Applicant's Copy of ID  2. Membership Payment Receipt  Cooperative Account Number:				
Applicant's Signatu Date :		Shares: / RM 500 per share			Bank : CIMB Account Number: 8602184807				
OFFICE U	JSE ONLY								
Membership Fees RM20.00				Shareholder Shares RM					
Suite 702, Level 7, PJ T AMCORP Trade Centre +6(03) 7957 3686		Date Membership Nu	umber		Appro	oved By			
www.kuimb.com						Sic	nature		