



**APPLICATION FOR NEW RFID MEMBERSHIP CARD AND  
UPDATE OF MEMBER'S PERSONAL PARTICULARS**

M/ship No.:

Date:

**APPLICATION**

Please process new RFID RSYC membership card for:

**Photo Enclosed\***

1. Name of Member (as per IC/Passport):   
 Class of Member: Ordinary/Preference/Life/Temporary/Senior/Youth/Honorary/Others:  
 Membership Number:  
 Member Since (MM/YY):

And the following members of my family:

2. Name of Spouse:
- | <u>Children below 18 Years old:</u> | <u>Name</u> | <u>Date of Birth</u> | <u>Gender</u>                |
|-------------------------------------|-------------|----------------------|------------------------------|
| 3. Name of Child 01:                |             |                      | M/F <input type="checkbox"/> |
| 4. Name of Child 02:                |             |                      | M/F <input type="checkbox"/> |
| 5. Name of Child 03:                |             |                      | M/F <input type="checkbox"/> |
| 6. Name of Child 04:                |             |                      | M/F <input type="checkbox"/> |

\* Tick if coloured passport-sized photo is enclosed. Otherwise, this application may not be processed unless the applicant comes to the office club to have his / her/ their photo/s taken.

NO.	UPDATE OF PERSONAL PARTICULARS		Photo
7.	Title: Mr/Mrs/Dato/Datuk/Datin/Pn. Sri/Tan Sri/Others: (Please provide documentary evidence)		
8.	Status: Active/Inactive/Bad Debt Defaulter/ Others:		
9.	Mobile Phone No.:		
10.	Name of Company: Address: Tel. No.:	Position Held: Postcode: Email:	
11.	Residential Address: Tel. No.:		Postcode: Email:
12.	Gender: M <input type="checkbox"/> / F <input type="checkbox"/>	13. Date of Birth:	14. Marital Status:
15.	Nationality: Malaysian / Others: _____	16. IC/Passport:	

<b>Requested by:</b>  Signed: _____  Name:  Date/Time:	<b>(For Office Use Only)</b> Date Received:	Card Nos.: 1. 2. 3. 4. 5. 6.						
	Photo/s Received: Yes/No							
	Issued by:							
	Date:							
<b>Acknowledgment of Receipt of New Cards:</b> Total No. of Cards received <input type="text"/> for Membership No.: <input type="text"/> (Issued to above applications for <table border="1" style="display: inline-table;"><tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td></tr></table> ; please cross out whichever is/are not applicable.)			1	2	3	4	5	6
1	2		3	4	5	6		
Date: _____ Sign: _____								