



沙 巴 崇 正 校 友 會

Sabah Tshung Tsin Alumni Association

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Life Membership Application Form

永久校友会会员申请表

New Application

Card Replacement

PERSONAL PARTICULARS

Full Name as in IC/Passport (Mr/Mrs/Ms/Mdm/Others - Please Specify):

\_\_\_\_\_

(Name in Chinese): \_\_\_\_\_ Year of Graduation / Year Leaving STSS: \_\_\_\_\_

Residence Address: \_\_\_\_\_

Post Code: \_\_\_\_\_ City/State/Country: \_\_\_\_\_

Mailing Address (if different from Residence Address):

\_\_\_\_\_

\_\_\_\_\_

Post Code: \_\_\_\_\_ City/State/Country: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

NRIC No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Gender: Male  Female

EMPLOYMENT/BUSINESS PARTICULARS

Name of Company: \_\_\_\_\_ Designation: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

DECLARATION

I hereby apply for life membership and declare that I have completed a minimum of one year of academic education in Sabah Tshung Tsin Secondary School.

\_\_\_\_\_

Signature of Applicant Date: \_\_\_\_\_

Mode of Payment (RM100):

Cash  Ref#: \_\_\_\_\_

Cheque  Ref#: \_\_\_\_\_

Online Banking  Ref#: \_\_\_\_\_

FOR OFFICE USE ONLY

Recommended by: \_\_\_\_\_

Date Received: \_\_\_\_\_

Fees Received by: \_\_\_\_\_

Official Receipt: \_\_\_\_\_

Date Processed: \_\_\_\_\_

Processed by: \_\_\_\_\_

Signature of President

Date of Approval: \_\_\_\_\_

Date: \_\_\_\_\_

Membership Card No.: \_\_\_\_\_