

CORPORATE MEMBERSHIP APPLICATION FORM

The application form must be submitted together with an entrance fee of RM100

We, _____
(Name as appearing on Business Registration Certificate)

Wish to apply to be Ordinary / Affiliate* member. (* please delete whichever is not applicable)

GENERAL COMPANY INFORMATION

1. Constitution of business [tick where relevant]

- a) Sole Proprietorship
- b) Partnership
- c) Private Limited Company
- d) Public Limited Company
- e) Statutory Body / Company
- f) Academic Institution
- g) Other [Please indicate]

2. Business Registration / Certificate No:	
3. Place of registration / incorporation	
4. Date of registration / incorporation	
5. Registered Address	
6. Correspondence Address	
7. Home Address (if Sole Proprietor)	
8. Office Phone No :	Office Fax No :
9. Finance Contact :	Finance Phone No :
10. Capital Structure Authorized Capital: Paid Up Capital:	
11. Nature of Business	

12. Information of company representatives :	
Name:	Designation:
Tel No:	Email Address:
Name:	Designation:
Tel No:	Email Address:
Name:	Designation:
Tel No:	Email Address:
13. Do you have a risk management department?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If answer is YES, a) When was it formed? b) Number of employees in this department? c) The type of risk management activities undertaken by the department	
If answer is NO, d) The type of risk management activities undertaken by your company? e) When were such activities undertaken? f) Do you intend to set up a risk management department, and if so, the scheduled date.	
NAME : DESIGNATION : DATE : SIGNATURE :	COMPANY OFFICIAL STAMP :

REVIEW AND APPROVAL <i>(to be completed by MARIM Executive Board)</i>			
Signature:	Approval by Chairman	Approval by Secretary	Membership # :
			Membership Fees :
			Type of Membership : Ordinary / Affiliate
Name :			Date :
Date :			Official Receipt :