

MALAYSIAN PAEDIATRIC CARDIAC SOCIETY



Department of Paediatric Cardiology
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MEMBERSHIP APPLICATION FORM

Note: Before you apply, please make sure you are a member of the National Heart Association Malaysia

NHAM Membership : Yes No

Prof	Dr	Datuk/Dato	Others (<i>Please specify</i>)
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Name (Capital Letters)

Identity Card No. (New)

Occupation/Last Position Held (if retired)

MD	Cardiac Tech	SRNs	Others (<i>Please specify</i>)
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Speciality

Paediatrician	Paediatric Cardiology	Paediatric Anaesthesiology	Paediatric CT Surgeon	Paediatric Intensivist	Allied Health
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Date

Signature

FOR ADMINISTRATION ONLY

Membership Fees

Payable to National Heart Association of Malaysia

<input type="checkbox"/> One time – RM20.00 <input type="checkbox"/> Receipt No.	Payment by <input type="checkbox"/> Cheque (<i>Please include bank commission</i>) <input type="checkbox"/> Cash <input type="checkbox"/> Postal order
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Signature of Chairperson

Signature of Treasurer

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