



Malaysian Society of Atherosclerosis

NHAM secretariat

Heart House, Level 1, Medical Academies of Malaysia, 210 Jalan Tun Razak,
50400 Kuala Lumpur

Email: secretariat@malaysianheart.org

Website: www.malaysianheart.org

MEMBERSHIP APPLICATION FORM

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

NHAM Membership No _____

Name (Capital Letters) _____

Identity Card No. _____

Date of Birth _____ Nationality _____

Occupation / Last Position Held (if retired)

MD Cardiac Tech SRNs Others (please specify): _____

**Please tick the relevant*

Speciality

Cardiology Physician General Practitioners Endocrinology Nutrition Others (please specify): _____

**Please tick the relevant*

Mailing address

Tel No.: (Office) _____ (Mobile) _____

Email address _____

Date: _____

Signature: _____

For administration only

Membership Fees

- One time – RM20.00
- Receipt No.: _____

Payable to National Heart Association of Malaysia

Payment by:

- Cheque (Please include bank commission)
- Cash
- Postal Order

Signature of Chairperson

Signature of Treasurer

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