



All Women's Action Society

85Jalan21/1,SEAPark,46300PetalingJaya,Selangor,Malaysia
Tel:03-78774221Fax:03-78743312Email:awam@awam.org.my

Membership Application

- I wish to become a member / Associate member of AWAM and I agree to abide by the rules and objects stated in the Constitution and to all other directives as decided from time to time by the General Meeting.
- I understand and agree that I may not for any reason whatsoever use, quote or apply the name of AWAM without prior approval from AWAM's Executive Committee.

Name (in full and in BLOCK letters): _____

IC Number: _____ Date of Birth: _____

Occupation: _____

Home Address: _____

Contact: _____ (Handphone) _____ (Home)

Work Address: _____

Work Telephone: _____ Work Fax: _____

Mailing Address: Work Home

E-mail Address: _____

(Please note that once your membership has been approved you will be listed in our member lists and will be receiving circulars related to AWAM and her associates' activities. Please note that postings on the e-list about irrelevant and non related matters such as commercials, advertisements or messages that are religious in nature are strictly prohibited).

- Enclosed is cash / cheque / postal order for RM _____
- RM20.00 being payment for membership / associate membership fee
- RM _____ being a donation towards the services and programmes provided for women in crisis and for the running of AWAM Centre.

Note: Cheques shall be made payable to " **All Women's Action Society (AWAM)**".
Alternatively, you may remit the payment to **Hong Leong Bank A/C No. : 10600012656** and a copy of bank-in faxed to: 0378743312.

Signature: _____

Date: _____

AWAM
All Women's Action Society
 85Jalan21/1,SEAPark
 46300PetalingJaya
 Selangor,Malaysia
 Tel:03-78774221Fax:03-78743312

I am interested in the following areas and wish to contribute {Please (√)}:

	Administrative (Maintaining the library, attend to incoming calls, newspaper cutting)
	Ethnicity and Religion
	Solidarity Building
	Organisational Development
	Violence Against Women

For Office Use:

Application Proposed by Name: Date:	Receipt No.: Listserv Update on	Remarks (if any):
Seconded by: Name: Date:		