

## APPLICATION FOR CORPORATE MEMBERSHIP

### A. COMPANY / ORGANISATION

Name \_\_\_\_\_  
Registration No. \_\_\_\_\_ Date of Registration \_\_\_\_\_  
Business Address \_\_\_\_\_  
Postcode \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_  
Tel No. \_\_\_\_\_ Fax No. \_\_\_\_\_ Email \_\_\_\_\_  
Website \_\_\_\_\_  
Statute under which the company / organisation is registered (e.g. Companies Act 1965) \_\_\_\_\_  
Main Objectives / Principal Activities \_\_\_\_\_

### B. KEY CONTACT ON MEMBERSHIP MATTERS (This section must be completed)

Name of Representative \_\_\_\_\_ Email \_\_\_\_\_  
Designation \_\_\_\_\_ Department \_\_\_\_\_  
Direct Line \_\_\_\_\_ Direct Fax \_\_\_\_\_ Mobile No. \_\_\_\_\_  
Name of Representative (Alternate) \_\_\_\_\_ Email \_\_\_\_\_  
Designation \_\_\_\_\_ Department \_\_\_\_\_  
Direct Line \_\_\_\_\_ Direct Fax \_\_\_\_\_ Mobile No. \_\_\_\_\_

### C. KEY CONTACT ON EVENTS (This section must be completed)

Name \_\_\_\_\_ Email \_\_\_\_\_  
Designation \_\_\_\_\_ Department \_\_\_\_\_  
Direct Line \_\_\_\_\_ Direct Fax \_\_\_\_\_ Mobile No. \_\_\_\_\_

### D. PAYMENT METHOD

Crossed cheques must be made payable to **MALYSIAN INSTITUTE OF CORPORATE GOVERNANCE**  
For Interbank Giro (IGB) or direct payment, please email copy of transaction slip to [info@micg.org.my](mailto:info@micg.org.my)  
Name of Bank : Malayan Banking Berhad  
Account No. : 5141 6915 2428  
Swift Code : MBB EMYKL  
Bank's Address : 50-52, Jalan Sultan (52/4), 46200 Petaling Jaya, Selangor

### E. WE DECLARE that :

- All information contained in this application form are true and correct.
- This is an application for membership. No reference of affiliation with MICG will be made until approved and accepted.
- If accepted, we agree to abide by the Constitution and Rules / Codes of Malaysian Institute of Corporate Governance.
- If accepted, we will use our best endeavour to adhere to and uphold the highest standards of good corporate governance.

Company / Organisation Stamp

Signature \_\_\_\_\_  
Date \_\_\_\_\_  
Name \_\_\_\_\_  
Designation \_\_\_\_\_

### F. CHECKLIST FOR APPLICATION

- Certified True Copy of Constitution  
 Annual Subscription Fee : RM2000

Note : The Board of Governors shall have the full power and discretion as to the admission of any corporation to be a member of the Institute and may reject any application for membership without assigning any reasons hereto. [Refer MICG AA Cl. 8]

#### OFFICE USE ONLY

Date received \_\_\_\_\_  
Amount received \_\_\_\_\_  
Application in order  Yes  No  
Remarks \_\_\_\_\_  
Date of admission \_\_\_\_\_

Received by \_\_\_\_\_  
Cheque No. / Online Payment \_\_\_\_\_  
Official Receipt No. / Date \_\_\_\_\_ / \_\_\_\_\_  
Date approved by Board of Governors \_\_\_\_\_  
Membership No. \_\_\_\_\_