



INSTITUTIONAL MEMBERSHIP (CAP ONLY) APPLICATION FORM

HOW TO APPLY

Please complete the application form and return it with your payment** to:

Circulation Services Librarian
Tun Dr Lim Chong Eu Library
Wawasan Open University [DU013(P)]
Wholly owned by Wawasan Open University Sdn Bhd (700364-W)
54 Jalan Sultan Ahmad Shah, 10050 Penang, Malaysia
Tel: 604-2180 159/167 Fax: 604-227 9214 Email: library@wou.edu.my

INSTITUTIONAL APPLICANT INFORMATION *[Please type or print clearly]*

Organisation/Company

Company Registration No

Business Address

.....

Business Telephone Facsimile

Email

Key contact person

Designation Telephone (O) :

Reasons for Application

.....

MEMBERSHIP FEE *[Please tick where appropriate]*

- New application Registration fee of RM50.00
 RM1,000.00 for 1 to 10 users
 RM5,000.00 for >10 but up to 50 users
 RM10,000.00 for >50 but up to 100 users
 RM15,000.00 for >100 but up to 200 users
- Renewal of membership RM1,000.00 for 1 to 10 users
 RM5,000.00 for >10 but up to 50 users
 RM10,000.00 for >50 but up to 100 users
 RM15,000.00 for >100 but up to 200 users

INSTITUTION DECLARATION

We hereby declare that the information given in this application is true, complete and that our institution will abide by the library rules if my application is approved.

Submitted by (*Prof/Dr/Mr/Mrs/Ms)
 [* please circle where applicable]

Designation

.....
 Authorised Signature/Company Stamp Date

**** PAYMENT** [Please tick where appropriate]

- I hereby enclose a cheque in the amount of RM Cheque No
 Cheque should be crossed and made payable to **WAWASAN OPEN UNIVERSITY SDN BHD**
- I hereby enclose cash in the amount of RM
- Interbank transfer

Payee Name : WAWASAN OPEN UNIVERSITY SDN BHD
CIMB Account No. : 8004295774

. I hereby enclose receipt in the amount of RM.....

FOR LIBRARY USE ONLY

Date received

Membership Accepted Rejected

Institutional Membership No

Login-ID (issued by ITS)

Membership period

Cheque No Receipt No