

## INSTITUTIONAL MEMBERSHIP 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
54 Jalan Sultan Ahmad Shah, 10050 Penang, Malaysia
Tel: 604-2180 159 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	
Reasons for Application	
MBERSHIP FEE [Please	e 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
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Renewal of membership



## INSTITUTION DECLARATION

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	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)		
	Designation		
	Authorised Signature/Company Stamp Date		
** P.	AYMENT [Please tick where appropriate]		
	I hereby enclose a cheque in the amount of RM		
	I hereby enclose cash in the amount of RM		
	Interbank transfer		
	Payee Name: WAWASAN OPEN UNIVERSITY SDN BHD CIMB Account No.: 0742-000-2369-050		
	I hereby enclose receipt in the amount of RM		
	FOR LIBRARY USE ONLY		
Date	e received		
Mem	nbership Accepted Rejected		
Insti	tutional Membership No		
Logi	n-ID (issued by ITS)		
Mem	nbership period		
Chec	que No		