MALAYSIA SUDOKU SOCIETY MEMBERSHIP APPLICATION FORM

Name:		Sex:	Date of Birth:	
Nationality:		IC/Passport No.:		
Address:				
		_ Email Addres	SS:	
Mobile No.:		Telephone No.:		
If you are below the age* of	18 years, please	get the conse	nt of your parent/guardian:	
Parent/Guardian's Name:		Relationship	to Applicant:	
IC/Passport No.:		_ Signature:		
(* Please take note that the S	= = =			
	••••••			
Please let us know more abou	-		•	
·		•	Regularly / Sometimes / Rarely	
, , , , , , , , , , , , , , , , , , ,		Beginner / Intermediate / Advanced		
3. Where do you find Sudoku p			/ Books / Internet / Others	
4. Will you take part in Sudoku	competitions?	Yes / No /	Maybe	
5. If you can contribute to the d	evelopment of Ma	laysia Sudoku	Society, what can you do?	
6. What kind of activities would	you like the Socie	ety to organize?)	
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Entrance Fee is RM50 for Life Membership Please make your cheque payable to Ma The Secretary, Malaysia Sudoku Society, B	laysia Sudoku Society	r. Please write your	name behind your cheque and mail it to:	
If you prefer a more convenient way, yo account MBB 5123 5231 0757, after which name & IC no. on the slip). The easie mysudokusociety@gmail.com during the	h please fax this form a st way is to use onlir	nd the ATM / bank-i ne banking via May	in slip to 03-7725 1492 (please write your rbank. Please quote our email address	
Signature:	Date:		2 MA LAYSIA 1 7 3 8 6 5 SUDOKU 3 2 6 4 1 SOCIETY 9 7 1	
			(Registration No. 0542-07-WKL)	