



Gold Membership Application Form

Corporate Details:

- Name:
- Business address:
- Website:
- Parent company (if applicable):
- Country of incorporation:
- Year of incorporation:
- Turnover:
- Total workforce:

Business Activity (Tick all that apply):

- Banking, Insurance, other Financial Services
- Food, Beverage and Hospitality Industry
- Trade, Distribution, Retail
- Industrial and Manufacturing
- Transport, Energy and Telecommunications
- Civil works and Construction
- Art, Design and Science
- Business Services (please specify):
- Information and Communication Technology
- Travel, Tourism and M.I.C.E. Services
- Legal, Accounting, Tax Services
- Other (please specify):

Corporate Representative:

- Surname:
- Name:
- Nationality:
- Date of birth:
- Job title:
- Tel:
- Email:

I acknowledge that my membership will be valid after receipt of the membership fees and that I will be bound by the Memorandum and Articles of Association and by the by-laws applicable at the time to the Association.

Date:

Signature:

Please remit payment of **RM 5,000** by Cash or Cheque or Bank Transfer * (Nett of bank charges) to:

BankName: **CIMB Bank**

Account Number: **8000201511**

Account Name: **Pertubuhan Perniagaan Malaysia Itali – Malaysia Kuala Lumpur**

Bank Address: **CIMB Bank Berhad No 803-817 Bangunan Lim Batu 4 ½ Jalan Ipoh, 51200 Kuala Lumpur**

Swift Code: **CIBBMYKL**

*Please send the copy of receipt by email to secgen@imba.org.my

Appointed Corporate Nominee #1 (Optional):

- Surname:
- Name:
- Nationality:
- Date of birth:
- Job title:
- Tel:
- Email:

Appointed Corporate Nominee #2 (Optional):

- Surname:
- Name:
- Nationality:
- Date of birth:
- Job title:
- Tel:
- Email: