

**THE ROAD ENGINEERING ASSOCIATION OF ASIA AND AUSTRALASIA**

**APPLICATION FOR ADMISSION AS MEMBER**

**(For Life, Ordinary or Associate Member)**

**Instruction to Applicant :**

1. Please fill in all particulars requested

2. Applicant must state the grade of membership he is applying for

3. This form must be submitted together with ~~the~~ **~~copy of passport~~ and necessary Entrance and Annual**

**Subscription fees**

4. Please delete whichever is not applicable

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| **A. Personal Particular** | | | | | | | | |
| 1. Name In Full : |  | | | | | | | |
| 2. Address : |  | | | | | | | |
|  |  | | | | | | | |
|  | Postcode : |  | | | Country : |  | |
| 3. Phone : | Home : | | | Office : | | | HP : | |
| 4. Fax : |  | | 5. Email : | | | | | |
| 6. Place of Birth |  | | | | | | | |
| 7. Date of Birth |  | | | | | | | |
| 8. Nationality |  | | | | | | | |
| 9. Passport No |  | | | | | | | |

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| **B(i) STATEMENT BY PROPOSER\*** | | | | | | | |
| 1. Having known the applicant for \_\_\_\_\_\_\_\_\_\_\_ years, I recommend him, from personal knowledge, as in every respect worthy of the distinction of being admitted as a member of REAAA. | | | | | | | |
| 2. Name of Proposer |  | | | | | | |
| 3. Membership No |  | | | | | | |
| 4. Address : |  | | | | | | |
|  |  | | | | | | |
|  | Postcode : |  | | | Country : |  | |
| 3. Phone : | Home : | | | Office : | | | HP : |
| 4. Fax : |  | | 5. Email : | | | | |
| 6. Signature |  | | | | | | |
| 7. Date |  | | | | | | |

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| **B(ii) STATEMENT BY PROPOSER\*** | | | | | | | |
| 1. Having known the applicant for \_\_\_\_\_\_\_\_\_\_\_ years, I recommend him, from personal knowledge, as in every respect worthy of the distinction of being admitted as a member of REAAA. | | | | | | | |
| 2. Name of Proposer |  | | | | | | |
| 3. Membership No |  | | | | | | |
| 4. Address : |  | | | | | | |
|  |  | | | | | | |
|  | Postcode : |  | | | Country : |  | |
| 3. Phone : | Home : | | | Office : | | | HP : |
| 4. Fax : |  | | 5. Email : | | | | |
| 6. Signature |  | | | | | | |
| 7. Date |  | | | | | | |

*\*\*\* Each applicant must have two (2) proposer(s)*

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| **C. EDUCATION** | | | |
| 1. General Education | | | |
| Secondary School |  | | |
| Examination Passed |  | | Date : |
|  | | | |
| 2. Technical / Scientific Education | | | |
| University 1 |  | | |
| Qualification 1 |  | Date | |
| University 2 |  | | |
| Qualification 2 |  | Date | |
| University 3 |  | | |
| Qualification 3 |  | Date | |

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| **D. CAREER (State title of position, responsibility with brief details of nature of work)** | | |
| **Position** | **Responsibility** | **Date** |
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| **E. MEMBERSHIP IN OTHER SOCIETIES / PROFESSIONAL INSTITUTIONS** | | |
| **No** | **SOCIETIES / PROFESSIONAL INSTITUTIONS** | **Membership No** |
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| **F. PRESENT POSITION** | | | | | | | | | |
| 1. Name of Employer |  | | | | | | | | |
| 2. Address of Employer |  | | | | | | | | |
|  |  | | | | | | | | |
|  | Postcode : |  | | | | Country : |  | | |
| 3. Phone : | Home : | | | Office : | | | | HP : | |
| 4. Fax : |  | | 5. Email : | | | | | | |
| 6. Title of Position |  | | | | | | | | |
| 7. Date of Appointment |  | | | | | | | | |
| 8. Responsibility / Nature of Work |  | | | | | | | | |
| 9. Grade of Membership Applied For | LIFE | | | | ORDINARY | | | | ASSOCIATE |

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| **H. UNDERTAKING TO BE SIGNED BY APPLICANT**  I, the undersigned confirm that the information given in the application form is the best of my knowledge correct and that in the event of my admission as Life, Ordinary or Associate Member, I will be governed by the proposed Constitution of the Association as they are now formed or they may hereafter be altered | | |
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| **Signature** |  | **Date** |

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| **I. PAYMENT**  I, hereby authorise / enclose my payment of RM\_\_\_\_\_\_\_\_\_\_\_\_ for the entrance fee and annual subscription.     * Cheque / Bank Draft No : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * Payment by Credit Card Master Visa   Credit Card No : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Expiry Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  I, confirm the above information provided in this standing instruction is correct and true. In the event of any changes or cancellation of the instruction above, I shall keep REAAA informed in writing or by giving fresh standing instruction. | | |
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| **Signature** |  | **Date** |

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| **MEMBERSHIP FEES (REAAA Constitution – Schedule A)** | | | |
| **Entrance Fees** |  | **Annual Subscriptions** | |
| Ordinary & Associate Members | RM50.00 or equivalent US$ | Ordinary & Associate Members | RM50.00 or equivalent US$ |
|  |  |  |  |
| Institutional Members | RM1,100.00 or equivalent US$ | Institutional Members | RM880.00 or equivalent US$ |
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| **Life Members**  The membership fee shall be the Ordinary members’ annual subscription (determined at the time of application to become a Life member) times 55 minus the age of the applicant in the whole year at the time of applying for the life membership. | | | |

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| REAAA-Road-Engineering-Association-of-Asia-and-Australasia-trans.png  Hon. Secretary General  The Road Engineering Association of Asia & Australasia  46B, Jalan Bola Tampar 13/14  Section 13, 40100 Shah Alam  Selangor Darul Ehsan Tel : 603-5513 6380 / 603 5524 6380  Malaysia Fax: 603-5513 6390  E-mail : [reaaa.finance@gmail.com](mailto:reaaa.finance@gmail.com)  [finance@reaaa.net](mailto:finance@reaaa.net), [exec.sec@reaaa.net](mailto:exec.sec@reaaa.net)    Date:  **RE : PAYMENT FOR SUBSCRIPTION / ARREARS BY CREDIT CARD**  I wish to pay entrance / annual subscription / arrears by credit card.  Please charge to my credit card for the amount of RM \_\_\_\_\_\_\_\_\_\_ ***(Please indicate amount in Ringgit Malaysia Only)***  Please tick Visa MasterCard  Card No. - - - -  Expiry Date -  Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***(Signature must correspond with signature on your credit card)***  Name in Full \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***(Name must correspond with name on your credit card)***  Members’ Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Membership No\_\_\_\_\_\_\_\_\_  Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Phone No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |