



# MMA LIFE MEMBERSHIP APPLICATION FORM



**To: The Honorary General Secretary**  
**MALAYSIAN MEDICAL ASSOCIATION**  
 4<sup>th</sup> Floor, MMA House, 124 Jalan Pahang, 53000 Kuala Lumpur  
 Tel No: 03-4041 1375 Fax No: 03-40418187  
 E-mail: [membership@mma.org.my](mailto:membership@mma.org.my) Website: [www.mma.org.my](http://www.mma.org.my)

1. Title (e.g Tan Sri, Dato', Prof, Dr)

2. Name (as per NRIC)

3. NRIC (New)

4. MMC Registration No.  5. Date of Registration 

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Applicable for joint member only (\*)**

6. Spouse's Name\*

7. Spouse's NRIC (New)\*

Is he/she Joint Member :  Yes  No (If joint member, spouse must complete & submit a separate application form)

**8. Professional Qualifications: (Basic Degree and Postgraduate Qualification)**  
*(Please state the full date you obtained the Degree)*

Qualification	Degree	University	Country	Date Of Qualification			
Basic Degree				<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
1. Postgraduate				<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Postgraduate				<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Postgraduate				<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**9. If you have any change of address, telephone numbers and e-mail address, kindly fill up in the form.**

**Home Address**

**Working Address**

Postcode: 
State:

Postcode: 
State:

Telephone /Mobile No: ..... E-mail Address: .....

10. Please send my correspondence to my  Home Address  Working Address

1) I am submitting this membership application to become a Life Member of the Malaysian Medical Association and I agree to abide by the Constitution of the Association and regulations as may be enacted from time to time.

2) A Crossed Cheque / Bank draft / Money Order or Postal Order for the appropriate amount to be payable to **'MMA SPECIAL SAVINGS (LIFE INVESTMENT) FUND'**

Signature : ..... Date: .....

**NOTES**

**Life Membership - Clause 4 (2)**

Life Membership of the Association shall be opened to Ordinary Members who are fully registered in the Register kept by the Registrar of Medical Practitioners, and who in place of annual subscription to the Association, shall have contributed to the Capital of the MMA Special Savings (Life Investment) Fund established by the Association, an amount determined by the Annual General Meeting from time to time. The annual income generated by investment of the Accumulated Capital contributions of each member to the Fund shall be irrevocably assigned in perpetuity by the contributor to the Council of the Association to disburse as it deems fit.

**Life Membership Contributions - Clause 6 (5)**

- (i) An Ordinary Member who is fully registered in the Register kept by the Registrar of Medical Practitioners, can become a Life Member upon paying RM2,500.00 to the capital of the Special Life Investment Fund to be eligible for election by Council as a Life Member. Clause 4 (2) refers.
- (ii) An Ordinary Member who is a spouse of a Life Member shall contribute half of RM2,500.00 to qualify for Life Membership.
- (iii) On completion of their housemanship and being given full registration status by the Registrar of Medical Practitioners, Medical Officers within the first 2 years of service, can become a life member upon paying RM 1500 to the capital of the Special Life Investment Fund to be eligible for election by Council as a Life Member. Clause 4 (2) refers.

---

**MALAYSIAN MEDICAL ASSOCIATION**

(This form is to be completed by members applying for Life Membership and to be submitted to MMA along with the Life Membership application form)

To,  
**Honorary General Secretary**  
Malaysian Medical Association  
4<sup>th</sup> Floor, MMA House  
124 Jalan Pahang  
53000 Kuala Lumpur

**IRREVOCABLE ASSIGNMENT OF INCOME FROM ACCUMULATED CAPITAL CONTRIBUTIONS BY A MEMBER TO MMA SPECIAL SAVINGS (LIFE INVESTMENT) FUND**

I, Dr.....New NRIC No.....

being an ordinary member applying for Life Membership of the Association, herein agree to make capital contribution to the MMA Special Savings (Life Investment) Fund and hereby irrevocably assign in perpetuity to the Malaysian Medical Association all the annual income that may be derived hereinafter from the investment of my accumulated capital Contribution to the above said Fund for the Council of the Association to disburse the income as it deems fit. I further confirm that to my executors, assign or successors shall have no rights hereinafter to the above said investments income that I have assigned in perpetuity to the Malaysian Medical Association.

Signature: .....

Date : .....

---

**FOR OFFICE USE ONLY**

Date Paid	Payment for	Cash/Cheque/MO/PO	RM	Receipt No.	Issued by

Receipt issued on: