



Lot L4-011, Level 4, Sutera Mall,
No.1, Jalan Sutera Tanjung 8/4, Taman Sutera Utama,
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Website: www.mylibrary.my
Email: mylibrary@tanahsutera.com

MEMBERSHIP REGISTRATION FORM FOR FAMILY

Please enter the following information

PART I: PERSONAL INFORMATION OF FAMILY HEAD

Full name _____

IC/MyKad/Passport No. _____ (Please leave out the dashes)

Date of Birth ____ / ____ / ____ DD/MM/YYYY Gender Female Male

Race: Malay Chinese Indian Others: _____

Contact Number 1. _____ 2. _____

E-Mail Address _____

Permanent (1) & Mailing Address (2)

1. House Number & Street Name _____

Postal Code _____ State _____ Country _____

2. House Number & Street Name _____

Postal Code _____ State _____ Country _____

PART II: PERSONAL INFORMATION OF FAMILY MEMBERS

1. Full name _____ Membership no. M _____ PIN _____
(for official use)

IC/MyKad/Passport/Birth Certificate No. _____ (Please leave out the dashes)

Relationship to Family Head _____

Date of Birth ____ / ____ / ____ DD/MM/YYYY Gender Female Male

Race: Malay Chinese Indian Others: _____

Contact Number 1. _____ 2. _____

E-Mail Address _____ Card S/N _____

2. Full name _____ Membership no. M _____ PIN _____
(for official use)

IC/MyKad/Passport/Birth Certificate No. _____ (Please leave out the dashes)

Relationship to Family Head _____

Date of Birth ____ / ____ / ____ DD/MM/YYYY Gender Female Male

Race: Malay Chinese Indian Others: _____

Contact Number 1. _____ 2. _____

E-Mail Address _____ Card S/N _____

3. Full name _____ Membership no. **M** _____ **PIN** _____
(for official use)

IC/MyKad/Passport/Birth Certificate No. _____ (Please leave out the dashes)

Relationship to Family Head _____

Date of Birth ____ / ____ / ____ DD/MM/YYYY Gender Female Male

Race: Malay Chinese Indian Others: _____

Contact Number 1. _____ 2. _____

E-Mail Address _____ Card S/N _____

4. Full name _____ Membership no. **M** _____ **PIN** _____
(for official use)

IC/MyKad/Passport/Birth Certificate No. _____ (Please leave out the dashes)

Relationship to Family Head _____

Date of Birth ____ / ____ / ____ DD/MM/YYYY Gender Female Male

Race: Malay Chinese Indian Others: _____

Contact Number 1. _____ 2. _____

E-Mail Address _____ Card S/N _____

5. Full name _____ Membership no. **M** _____ **PIN** _____
(for official use)

IC/MyKad/Passport/Birth Certificate No. _____ (Please leave out the dashes)

Relationship to Family Head _____

Date of Birth ____ / ____ / ____ DD/MM/YYYY Gender Female Male

Race: Malay Chinese Indian Others: _____

Contact Number 1. _____ 2. _____

E-Mail Address _____ Card S/N _____

AGREEMENT & CONSENT:

I accept the responsibility for the use of all the cards under this membership type, including all items borrowed with them and fines/fees incurred. I understand that fines/fees are payable at the time they are charged. Delinquent accounts are subject to suspension of the use of the card. I agree to inform the library immediately of any changes of my personal contact or any of my family members and let the library know as soon as possible if any of the cards is lost or stolen.

Agree Signature of Family Head _____

FOR OFFICIAL USE:

Membership number **M** _____ **PIN** number _____ **S/N** _____

Membership Period Start date ____ / ____ / ____ DD/MM/YYYY Expired on ____ / ____ / ____ DD/MM/YYYY

Registration Fee **RM** _____ b. Subscription Fee **RM** _____

Total **RM** _____

Mode of Payment Top up card Credit card Number: _____

[Please tick and fill in] Cash Cheque Number: _____

Staff processing the application _____
(name, designation & signature)