



Bangunan MAICSA, No. 57, The Boulevard, Mid Valley City, Lingkaran Syed Putra, 59200 Kuala Lumpur.  
Tel: 03-2282 9276 Fax: 03-2282 9281 Email: members@maicsa.org.my

## PAYMENT FORM

### MEMBER DETAILS

Name : \_\_\_\_\_  
Membership No : \_\_\_\_\_  
Mobile No : \_\_\_\_\_  
Email Address : \_\_\_\_\_

### PAYMENT DETAILS

Payment for the following (Please tick [] one only):

- [  ] Membership Subscription: (Fellow / Associate / Graduate / Retired)  
[  ] Affiliate Fee  
[  ] Practising Certificate Renewal

**Amount Due:** \_\_\_\_\_

### Payment Method:

1. Cheque/M.O/Bank Draft No. : \_\_\_\_\_ (made payable to "MAICSA")
2. Online Banking (Please attach the proof of payment or receipt from the bank)  
Name of Bank: \_\_\_\_\_ Ref No : \_\_\_\_\_ Date: \_\_\_\_\_
3. Credit Card: Please tick [] and fill up the following section:-  
[  ] Yes, I wish to pay for the year of 20\_\_\_\_\_  
[  ] Yes, I authorise MAICSA to charge my credit card every year for the abovementioned payment as indicated below:  
[  ] Charge to VISA [  ] Charge to MASTERCARD

Bank : \_\_\_\_\_  
Card No : \_\_\_\_\_  
Name on the card : \_\_\_\_\_  
Expiry date : \_\_\_\_\_  
Signature of cardholder : \_\_\_\_\_ Date: \_\_\_\_\_

### FOR OFFICE USE ONLY

Receipt No:  
Receipt Date:  
Tax Inv. No:  
Approval Code: