

# MPH KIDZ CLUB APPLICATION FORM

membership card no.

## APPLYING FOR

- new card       renewal card  
 replacement card       change of address/contact number

**CHILD'S FULL NAME** (as in BC/Passport) [please use BLOCK LETTERS]


**DATE OF BIRTH** -- **AGE**

## GENDER

- male       female

## RACE

- Malay     Chinese     Indian     others

**COMPLETE CORRESPONDENCE ADDRESS** (in Malaysia only)


**POSTCODE**  **TOWN**

**STATE**

**PARENT'S / GUARDIAN'S CONTACT NO.**

**HOUSE** -

**MOBILE** -

**WOULD YOU LIKE TO RECEIVE E-MAIL FROM US?**

- Yes     No

**E-MAIL**

**PARENT'S / GUARDIAN'S NAME**

**CHILD'S FAVOURITE AUTHOR / SERIES**

## PLEASE (✓) ANY 3 PREFERRED INTERESTS

- |   |   |
|---|---|
| <input type="checkbox"/> Writing & Drama (01)             | <input type="checkbox"/> Legends, Myths & Fables (09) |
| <input type="checkbox"/> Art & Craft (02)                 | <input type="checkbox"/> Science & Technology (10)    |
| <input type="checkbox"/> Sports & Outdoor Activities (03) | <input type="checkbox"/> Fantasy/Science Fiction (11) |
| <input type="checkbox"/> Computers (04)                   | <input type="checkbox"/> Game Books (12)              |
| <input type="checkbox"/> Toys/Board Games (05)            | <input type="checkbox"/> Adventure/Mystery (13)       |
| <input type="checkbox"/> Movies & Cartoons (06)           | <input type="checkbox"/> School References (14)       |
| <input type="checkbox"/> Children Audio Books (07)        | <input type="checkbox"/> Junior Classics (15)         |
| <input type="checkbox"/> Music (08)                       | <input type="checkbox"/> Contests (16)                |

I, as parent/guardian of the applicant, agree to all the membership terms and conditions. I also understand that MPH will not be held responsible for any mishaps that should befall my child during any activity/event, although due care and precaution will be taken by the organisers.

Parent's or Guardian's Signature

## FOR THE FUTURE OF OUR CHILDREN



MPH  
BOOKSTORE

## FOR OFFICE USE ONLY

membership card no.

expiry date --

issued by \_\_\_\_\_

Please (✓) where applicable

- |                               |                               |                             |                               |                               |                              |                              |
|-------------------------------|-------------------------------|-----------------------------|-------------------------------|-------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> MV   | <input type="checkbox"/> BSH  | <input type="checkbox"/> BV | <input type="checkbox"/> BVII | <input type="checkbox"/> BBP  | <input type="checkbox"/> TM  | <input type="checkbox"/> GEM |
| <input type="checkbox"/> AA   | <input type="checkbox"/> SACC | <input type="checkbox"/> 1U | <input type="checkbox"/> TC   | <input type="checkbox"/> SP   | <input type="checkbox"/> SPY | <input type="checkbox"/> TS  |
| <input type="checkbox"/> GSSA | <input type="checkbox"/> MP   | <input type="checkbox"/> TK | <input type="checkbox"/> BR   | <input type="checkbox"/> AP   | <input type="checkbox"/> TSP | <input type="checkbox"/> KC  |
| <input type="checkbox"/> GNP  | <input type="checkbox"/> JS2  | <input type="checkbox"/> GS | <input type="checkbox"/> TU   | <input type="checkbox"/> JBCS | <input type="checkbox"/> SPR | <input type="checkbox"/>     |
| <input type="checkbox"/>      | <input type="checkbox"/>      | <input type="checkbox"/>    |                               |                               |                              |                              |

date: \_\_\_\_\_ receipt/cash memo no: \_\_\_\_\_

amount: \_\_\_\_\_ promotion (if applicable): \_\_\_\_\_