

诗巫卫理神学院校友会

Methodist Theological School Alumni Association
Methodist Theological School,

Membership Application

(A) Applicant's Information

Name : _____ (E) _____ (C)

Sex : Male Female Email Address: _____

D.O.B.: ____/____/____ (DD/MM/YY) I.C. No.: _____

Current Address : _____

Permanent Address : _____

Contact Number : _____ (H) _____ (O) _____ (HP)

Current Church : _____ Graduated in year _____

Program (Please tick where appropriate):

Theology Program : L.Th. Dip. B.Th. B.D. M.Div. M.Min.

Theology Program (Missiology) : L.Th. Dip. B.Th. B.D. M.Div.

Worship & Music Program : Certificate Diploma B.A.

TEE Program : C.C.S. D.C.S. M.C.S.

Worship & Music Program by Extension : Certificate

(B) Applicant's Oath

By the grace of the Lord, I hereby apply to be Full-Member/Associate Member of the Alumni Association of Methodist Theological School Sibuluan. I'm willing to obey to the Constitution, Rules and Regulations, including making the payment of member fee. I promise to give full support to the objectives of Association and be united with each others in order to make our objectives realizable.

Applicant's Signature: _____

Date: _____

(C) Decision by Executive Committee

Decision: () Accepted () Declined Date of Decision: _____

Secretary's Signature: _____ Chairperson's Signature: _____

(D) Payment of Member Fee

Status: () paid () unpaid Receiving Date: _____

Treasurer's Signature: _____