



## Members Information Update Form

### 1. Updated Members Information-

Company Name: \_\_\_\_\_

Membership Number: \_\_\_\_\_

#### Company Address:

Address: \_\_\_\_\_

\_\_\_\_\_

#### Contact Information:

Contact Person: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Office Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

### 2. Authorization to Update Membership Information-

By signing my signature below, I am certifying that the above information is true and accurate to the best of my knowledge. I also certify that I am an authorized person and allowed to execute this membership update form.

\_\_\_\_\_  
Authorized Signature & Company Stamp

Name:

Date:

*Please email or fax this form to us*

**KUALA LUMPUR MALAY CHAMBER OF COMMERCE**  
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