

FOR OFFICE USE ONLY

Verified by Honorary Secretary: _____

Signature: _____

Date: _____

Verified by President: _____

Signature: _____

Approved on (date): _____

Membership ID#:

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Kindly attach your completed form and membership Subscription cheque made payable to "Persatuan Hipertensi Malaysia" to :

Malaysian Society of Hypertension (The Secretariat)

c/o Servier Malaysia Sdn Bhd
1301, Level 13, Uptown 2,
No. 2 Jalan SS21/37, Damansara Uptown,
47400 Petaling Jaya, Selangor
Tel : 03 – 7726 3866
Fax : 03 – 7725 1049

Persatuan Hipertensi Malaysia (Malaysian Society of Hypertension)



Kawalan Ke arah Kesejahteraan (Optimal Control for Optimum Wellness)

APPLICATION FOR MEMBERSHIP

