



ASSOCIATION OF BARISTA, BARTENDERS & SOMMELIERS MALAYSIA

Photo

email: secretary@abbsmy.org

APPLICATION FOR MEMBERSHIP

Name: Mr or Miss _____

NRIC/ Passport : _____

Citizenship: _____

Date of Birth: _____

(MUST BE 18 AND ABOVE)

Years of Employment: _____

Name of Company: _____

Work Designation : _____

Email: _____

Phone Number: _____

Address: _____

Please mark in the appropriate box



for the Membership category:

Full Member (RM50.00)

☐

Ordinary Member (RM40.00)

☐

Associate Member (RM60.00)

☐

(Barista/Bartender/Sommelier)

(Student)

(Others)

Registration fee (one-time payment) (RM30.00)

*Guest Member

(WSQ Alumni)

☐

*Guest Member

(Corporate)

☐

By invitation only

I hereby declare that the information given in this application form is correct.

I am aware that my personal data will be protected and will be used for association record only and will not be given to any other parties without my consent.

I attach a money order/cheque of RM_____ being the registration and membership fees.

(do not send cash)

Date: _____ Signature: _____

FOR OFFICIAL USE ONLY

Membership Status: _____ Membership No: _____

Membership Effective Date: _____ Date Approved: _____

Remarks: _____ Signature: _____