



RAKAN ST. JOHN - SELANGOR

Photo

## **REGISTRATION FORM**

Full Name : \_\_\_\_\_  
(according to IC)

IC No. : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Contact No. : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Email : \_\_\_\_\_

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

Preferred District for Activities (may choose more than 1):

- |                                   |                                       |   |
|-----------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Gombak   | <input type="checkbox"/> Hulu Langat  | <input type="checkbox"/> Hulu Selangor  |
| <input type="checkbox"/> Klang    | <input type="checkbox"/> Kuala Langat | <input type="checkbox"/> Kuala Selangor |
| <input type="checkbox"/> Petaling | <input type="checkbox"/> Sabak Bernam | <input type="checkbox"/> Sepang         |

Occupation : \_\_\_\_\_

Speciality/ Skill : \_\_\_\_\_

Area of Interest (may choose more than 1):

- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> First Aid                    | <input type="checkbox"/> Disaster Relief | <input type="checkbox"/> Fund Raising |
| <input type="checkbox"/> Mobile Clinic                | <input type="checkbox"/> Recycle         | <input type="checkbox"/> Fellowship   |
| <input type="checkbox"/> Other (please specify) _____ |  |                                       |

T-Shirt Size : \_\_\_\_\_

Medical History : \_\_\_\_\_

Allergy : \_\_\_\_\_

Emergency Contact:

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

Relationship : \_\_\_\_\_

Contact No. : \_\_\_\_\_ - \_\_\_\_\_

Applicant's Signature:

\_\_\_\_\_

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

Date : \_\_\_\_\_

<b>FOR OFFICE USE</b>
(Area Commander Cop & Sign)

Notes:

- Please attach a copy of your Identification Card and certificate(s) of your professional qualification (if applicable) together with this application form.
- Please submit this registration form, supporting document(s) and an entrance fee of RM100 through the Area Headquarter nearest to you.
- Please contact us at [sjamselangor@sjam.org.my](mailto:sjamselangor@sjam.org.my) for further information of Rakan St. John – Selangor.