



**PERSATUAN SKUASY SELANGOR**  
Squash Racquets Assoc. of Selangor (SRAS)  
P.O Box 449 Jln Sultan, 46750 Petaling Jaya  
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R 2017-

## JUNIOR MEMBERSHIP RENEWAL FORM

### APPLICANT'S DETAILS

NAME	
DATE OF BIRTH	
IC / PASSPORT	
HOME ADDRESS	
FATHER'S/ MOTHER'S NAME – (only 1 NAME)	
HP NO.	
EMAIL ADD:	
SCHOOL/ COLLEGE:	
TRAINING CENTRE/ CLUB/ COACH NAME:	
YEAR REGISTERED WITH SRAS AS MEMBER	( Should be 2015)

RENEWAL is applicable if there is ONE year lapse in payment of membership fees. Only if individual member fail to pay up membership fees for 2 consecutive years will he/she automatically cease to be member

Enclosed herewith is cash RM 10 for Renewal of Membership

Upon acceptance of my application, I will abide by the Rules & Regulations of the SRAS Constitution.

Signature of Applicant

\_\_\_\_\_

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

### **FOR OFFICE USE ONLY:**

Receipt No: \_\_\_\_\_

Amount: RM \_\_\_\_\_