

## **N**omination Instructions Form

| NAME OF APPLICANT/   | :   | DATU   | K/ D                                  | ATIN      | / MF  | R/ M        | IDM.  | / MI  | SS/N | NON   | IINE | E (11 | V FUL | L/ BL | .OCK | LE | TTEF | RS) |     |    |         |            |         |        |  |  |  |
|--|---|--|---------------------------------------|-----------|-------|-------------|-------|-------|------|-------|------|-------|-------|-------|------|----|------|-----|-----|----|---------|------------|---------|--------|--|--|--|
| (AS IN THE MEMBERSHIP<br>AGREEMENT)  |   |  |                                       |           |       |             |       |       |      |       |      |       |       |       |      |    |      |     |     |    | T       | Τ          |         | $\Box$ |  |  |  |
|  |   |  |                                       |           |       |             |       |       |      |       |      |       |       |       |      |    |      |     |     |    | $\perp$ | $\perp$    | $\perp$ |        |  |  |  |
| NRIC / PASSPORT NO.  | :   |  |                                       |           |       |             |       |       |      |       |      |       |       |       | ]    |    |      |     |     |    |         |            |         |        |  |  |  |
| MEMBERSHIP NO.   | :   |  |                                       |           |       |             |       |       |      |       |      |       |       |       |      |    |      |     |     |    |         |            |         |        |  |  |  |
| RESIDENCE TEL NO.  | :   |  |                                       |           |       |             |       |       |      |       |      |       |       |       |      |    |      |     |     |    |         |            |         |        |  |  |  |
| OFFICE TEL NO.   | :   |  |                                       |           |       |             |       |       |      |       |      |       |       |       |      |    |      |     |     |    |         |            |         |        |  |  |  |
| MOBILE NO.   | :   |  |                                       |           |       |             |       |       |      |       |      |       |       |       |      |    |      |     |     |    |         |            |         |        |  |  |  |
| EMAIL  | :   |  |                                       |           |       |             |       |       |      |       |      |       |       |       |      |    |      |     |     |    | $\perp$ |            |         |        |  |  |  |
| RE: CLUB NOMINATION  I, as the above stated nar as my nominee to utilize t Please be advise on the f  (1) Signing Privileges  Kindly extend the Do not allow any  (2) Billing Statement  To bill directly to To bill me (Princ Other instruction | me woonle cluster in the cluster in | ub meming instraining factions in the communication of the communication | nbers<br>ruction<br>ilities<br>lities | hip wons: | ny no | effe<br>omi | ctive | e fro | m    |       |      |       |       |       |      |    |      |     |     |    |         |            |         |        |  |  |  |
| (3) Refundable Security  To be borne by r  To be borne by r  APPLICATION BY:   | nomin   | ee   |                                       | 1,000     | .00   |             |       |       | A    | λPΡΙ  | LIC/ | ATIO  | N A   | PPR   | αOV  | ED | / RI | ΞJΕ | ECT | EC | ) B\    | <b>/</b> : |         |        |  |  |  |
| Principal:   |   |  |                                       |           |       |             |       |       |      | /Jana |      |       |       | :     |      |    |      |     |     |    | _       |            |         |        |  |  |  |



**N**omination Application Form





Please return the completed form to:

## CAHAYA SPK RESORT CLUB BHD

No. 1, Jalan Hijau Serindit U9/68, Cahaya SPK, Seksyen U9, 40150 Shah Alam, Selangor Darul Ehsan. Tel: +(603) 7846-4407 | Fax: +(603) 7846-4905



## Nomination Application Form

| NAME OF APPLICANT/                                       | :       | DA     | TUK      | / DA   | ATIN  | / MF  | ₹/ M | DM/   | MIS    | 55/1 | NON   | /IINI | EE (// | V F      | ULL/ B  | LOC  | K LET    | TER   | S)   |      |        |        |          |          |          |         |          |     |     | Acceptan                 | C   |
|--|---------|--------|----------|--------|-------|-------|------|-------|--------|------|-------|-------|--------|----------|---------|------|----------|-------|------|------|--------|--------|----------|----------|----------|---------|----------|-----|-----|--------------------------|-----|
| (AS IN THE MEMBERSHIP AGREEMENT)                         |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     |                          |     |
|  |         |        |          |        |       |       |      |       |        |      |       | Γ     |        |          |         |      |          |       | Τ    |      |        | $\top$ |          |          |          |         |          |     | I   | l,                       |     |
| MEMBERSHIP NO.   |         |        |          |        |       |       |      |       |        |      | i i   | T     | T      | T        |         | 7    |          |       |      |      | •      |        | •        |          |          | •       |          |     |     |                          |     |
| WEINBEROTH 140.  |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         | _    |          |       |      |      |        |        |          |          |          |         |          |     | (   | of                       | _   |
| Please accept the person names                           | s below | as a   | Nom      | inee o | of my | Mem   | bers | hip a | t CAI  | IAYA | A SPK | ( RE  | SORT   | CL       | UB:     |      |          |       |      |      |        |        |          |          |          |         |          |     | 1   | the above No             | on  |
| NAME OF APPLICANT/                                       | :       | DA     | TUK      | / DA   | ATIN  | / MF  | R/ M | DM/   | MIS    | SS/I | NON   | /INI  | EE (11 | V F      | ULL/ Bi | LOC  | K LET    | TER   | S)   |      |        |        |          |          |          |         |          |     |     |                          |     |
|  |         |        |          |        |       |       |      |       |        |      |       | Τ     |        |          |         |      |          |       | T    |      | $\top$ | Т      |          |          |          |         |          |     | - 1 | hereby und               | er  |
|  |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     | abide by the             |     |
|  |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         | _    |          |       |      |      |        |        |          |          |          | •       |          |     | 1   | nomination.              |     |
| NRIC / PASSPORT NO.                                      | :       |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     | ı   | l understand             | 1 1 |
| MAILLING ADDRESS   | :       |        | Г        | Π      |       |       | Γ    |       |        |      | Т     | Т     | Т      | Τ        | $\top$  | Т    | Т        | Τ     | Т    | Т    | Т      | Т      | Т        | Т        | Т        | T       | $\neg$   |     |     | howsoever o              |     |
|  |         |        |          |        |       |       |      |       |        |      | +     | ╁     | +      | $\vdash$ | +       | +    | -        | +     | +    | +    | +      | +      | $\dashv$ | $\dashv$ | +        | -       | $\dashv$ | _   | ı   | Premises it b            | эе  |
|  |         |        | $\vdash$ |        |       |       |      |       |        |      | +     | +     | +      | +        | +       | +    | +        |       |      |      |        |        | +        | $\dashv$ | $\dashv$ | +       | $\dashv$ | -   | (   | Company ag               | ai  |
|  |         |        |          |        |       |       |      |       |        | _    |       | _     |        |          |         |      |          | ┙     | POS  | 510  | JOL    | Σ      | : [      |          |          |         |          |     | ,   |                          |     |
| RESIDENCE TEL NO.  | :       |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     | Yours Faithfu            | اال |
| OFFICE TEL NO.   | :       |        | Π        |        | ]     |       |      |       |        |      | T     | Τ     | $\top$ | 1        |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     |                          |     |
|  |         |        |          |        | ]     |       |      |       |        |      |       |       |        | ]        |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     |                          |     |
| MOBILE NO.   | :       |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     |                          | _   |
| EMAIL  | :       |        |          |        |       |       |      |       |        |      |       | Τ     |        |          |         | Τ    |          |       | Τ    |      | Т      | Т      |          |          |          |         |          |     | ;   | Signature (N             | 01  |
|  |         |        |          | _      |       |       |      |       | _      |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     | NAME                     |     |
|  |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     | I   | NRIC                     |     |
|  |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     |                          |     |
| Undertaking by the                                       | Mer     | nbe    | r (F     | Pric   | inp   | oal)  |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     | NOTE : PLEASE            | В   |
| I understand that a nomin                                | nee fe  | e to   | be o     | detei  | rmin  | ed b  | ov C | AH/   | AYA    | SPI  | K RI  | ESC   | DRT    | CL       | UB B    | HD   | ) is n   | ava   | ble  | for  | ead    | h n    | omi      | natio    | on m     | nade    | bv       | me  |     |                          |     |
| (Principal). I enclose here                              |         |        |          |        |       |       | -    |       |        |      |       |       |        |          |         |      |          | -     |      |      |        |        |          |          |          |         | -        |     |     |                          |     |
| Nomination Fee.  |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     | ,   |                          | , A |
|  |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     | We, CAHAY<br>abovesaid N |     |
| I hereby agree that in con                               |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     | •   |                          | 40  |
| due observance and performance said Nominee, under the O |         |        | -        | -      |       |       |      |       |        |      |       |       |        |          | -       | ns r | requi    | rea   | to D | e o  | bse    | rve    | a ar     | ia pe    | егтог    | mea     | Dy       | my  |     |                          |     |
| Sala Nollillice, allael the C                            | 001131  | itutic | ni ai    | ila D  | yo L  | Lavvo |      | O/ (I | 1, (1, | ( 01 | 1     | \LO   | OITI   | 01       | LOD.    |      |          |       |      |      |        |        |          |          |          |         |          |     |     |                          |     |
| I hereby undertake to pay                                | all du  | ue ar  | nd cl    | harg   | es ir | ncur  | red  | by n  | ny N   | lom  | inee  | e, hi | s fan  | nily     | / and   | gu   | est ir   | n the | e us | e o  | f the  | e fa   | ciliti   | es o     | of CA    | HAY     | Ά        | SPK |     |                          |     |
| RESORT CLUB in the ev                                    |         |        | -        |        |       |       |      |       | y th   | e s  | ame   | an    | ıd er  | ısu      | ire th  | at   | my N     | lom   | inee | e al | oide   | s b    | y th     | ie C     | ons      | titutio | on       | and |     |                          |     |
| Bye-Laws established by                                  | CAHA    | AYA S  | SPK      | RES    | SOR   | T C   | LUB  |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     | i   | Manager                  |     |
|  |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     | CAHAYA SP                | K   |
|  |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     |                          |     |
| APPLICATION BY:-   |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     |                          |     |
|  |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     |                          |     |
|  |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     |                          |     |
| Signature (Principal)                                    |         |        | _        |        |       |       |      |       |        |      | _     |       |        |          | D       | ate  | <u>+</u> |       |      |      | _      |        |          |          |          |         |          |     |     |                          |     |
| Membership No:   |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     |                          |     |
|  |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     |                          |     |
|  |         |        |          |        |       |       |      |       |        |      |       |       |        |          |         |      |          |       |      |      |        |        |          |          |          |         |          |     |     |                          |     |

## Acceptance and Undertaking by Nominee

| ,  | NRIC/ Passport No   |
|--|---|
| of   |   |
| he above Nominee, do accept this Nomination,     | which entitles my family and I to use the Facilities at the CAHAYA SPK RESORT CLUB.   |
|  | curred by my family, my guess and I in use of the facilities of CAHAYA SPK RESORT CLUB and to CAHAYA SPK RESORT CLUB. Failling which, the CLUB reserves the rights to terminate my  |
| lowsoever caused while on or wothin the CAI      | JB shall not be liable for any personal injury, damage, loss or inconvenience whatsoever and HAYA SPK RESORT CLUB PREMISES or to any goods or chattels brought upon to the CLUB at my family and I enter on to the CLUB Premises at my/ our own risk and agree to indemnify the |
| ours Faithfully,                                 |   |
|  |   |
| Signature (Nominee)                              | Date  |
| IAME   |   |
| IRIC   |   |
| IOTE : PLEASE BE INFORMED THIS NOMINATION CAN BE | TERMINATED BY EITHER PRINCIPAL OR NOMINEE BY SUBMITTINGONE (1) MONTH WRITTEN NOTICE TO THE CLUB.  |
|  | ///////////// FOR OFFICE USE ONLY ////////////////////////////////////  |
| Ve, CAHAYA SPK RESORT CLUB BHD hav               | ing received and considered the Form of Nomination herein, hereby approved / reject the   |
|  |   |
|  |   |
|  |   |
| Manager CAHAYA SPK RESORT CLUB BHD               |   |