



The Malaysian Institute of Chartered Secretaries and Administrators  
Bangunan MAICSA, No. 57 The Boulevard,  
Mid Valley City, Lingkaran Syed Putra, 59200 Kuala Lumpur  
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### RENEWAL FORM FOR PRACTISING CERTIFICATE

Name:.....  
(as per IC)

Membership No. :..... PC Expiry Date : 31 December .....

*(Please tick the appropriate boxes)*

#### A. RENEWAL

1)  I hereby apply for renewal of my Practising Certificate for one year, from 1 January to 31 December \_\_\_\_\_ and I confirm that I will continue to be bound by the Regulations of the Institute governing the issue of the Practising Certificate and any other relevant rules for the time being in force. I also confirm that there has been no material change in my circumstances affecting my ability to practise, and that I have practised \*with / without any claim upon my Professional Indemnity Insurance Policy and that no circumstances have arisen, in connection with my practice, which might lead to disciplinary action under Bye-Law 24.  
(\* Delete as appropriate. Please provide details of any claim in a letter to be attached to this form).

2)  I confirm that my Professional Indemnity Insurance Policy, has been renewed and is valid. Details of my Professional Indemnity Insurance are as follows:-

Insurance Company: \_\_\_\_\_

Policy No: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

*(Note: Evidence of renewal of the Professional Indemnity Insurance is attached)*

#### 3) Mode of Payment:

1) **Online payment** - [www.maybank2u.com.my](http://www.maybank2u.com.my), steps (Accounts & Banking > Bill Payment > Make a one-off payment > View all payees by category > Select others > Continue > Select 'MAICSA')

2) **Direct Transfer** - MBB: 5144-8630-1427

3) **Credit Card** – Please complete the Payment Form

([http://www.maicsa.org.my/download/members/members\\_subscription\\_form.pdf](http://www.maicsa.org.my/download/members/members_subscription_form.pdf)) and return to MAICSA via email to [members@maicsa.org.my](mailto:members@maicsa.org.my) or fax to 03-2282 9281.

4) **Cheque/ Bank draft** - All cheques and bank drafts should be made payable to “MAICSA”

*Please email a copy of your bank-in slip/ payment advice to [members@maicsa.org.my](mailto:members@maicsa.org.my) or fax to 03-2282 9281 for verification and our records.*

#### B. NON-RENEWAL

I do not wish to renew my Practising Certificate as required by Regulation C (5). I return herewith my Practising Certificate. My reason for withdrawal: - .....

#### FOR OFFICE USE ONLY

Date:.....Receipt No: .....