



THE INTERNATIONAL SCHOOL OF KUALA LUMPUR

2, Lorong Kelab Polo Di Raja, 55000 Kuala Lumpur, Malaysia

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MEMBERSHIP APPLICATION FORM

THE SOCIETY FOR THE INTERNATIONAL SCHOOL OF KUALA LUMPUR

1. Parent 1:

Name: _____
Family Name *First Name* *Middle Name*

Passport No./Malaysian IC No: _____ Date of Birth: _____
DD / MM / YY

Citizenship: _____ Occupation: _____

*** Please submit a copy of passport information page or Malaysian IC with this form**

2. Parent 2:

Name: _____
Family Name *First Name* *Middle Name*

Passport No./Malaysian IC No: _____ Date of Birth: _____
DD / MM / YY

Citizenship: _____ Occupation: _____

*** Please submit a copy of passport information page or Malaysian IC with this form**

3.

Children's Names	Gender (M/F)	Date of Birth (MM / DD / YY)	Grade
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signature: _____
Signature of Applicant

Date: _____