ECKANKAR REGIONAL SEMINAR
Seminar Registration Form

Section A

Membership status: *** ESM** ☐ **Non-*ESM** ☐ Origin: **LOCAL** ☐ **OVERSEAS** ☐

ECKANKAR ID No.: ☐☐☐☐☐☐☐☐ **Expiry Date:** ☐☐ - ☐☐ - ☐☐☐☐
(Eckankar Spiritual Center USA membership no.) *(dd)* *(mm)* *(yy)*

If you are an *ESM member, please provide your *ESM No.: **ESM Membership No.** ☐☐☐☐

Name
(as in your Malaysian IC or Passport)

Section B *(If your spouse is attending the seminar, please provide the relevant information)*

Spouse attending: **YES** ☐ **NO** ☐ Relationship: **HUSBAND** ☐ **WIFE** ☐

ECKANKAR ID No.: ☐☐☐☐☐☐☐☐ **Expiry Date:** ☐☐ - ☐☐ - ☐☐☐☐
(Eckankar Spiritual Center USA membership no.) *(dd)* *(mm)* *(yy)*

If your spouse is an *ESM member, please provide his/her *ESM No.: ***ESM Membership No.** ☐☐☐☐

Name
(as in your Malaysian IC or Passport)

Section C *(if your children are attending the seminar, please provide the relevant information)*

***ESM No.** *(if applicable)*	**ESC No.** *(if applicable)*	**Name**	**Age**

ECKANKAR
Experience The Light and Sound of God

Section D *(Please provide your mailing address, telephone no. and e-mail address)*

Mailing Address

Post Code **City/Town**

State

Country

Tel. (office) ☐☐☐ - ☐☐☐☐☐☐☐ **Tel. (Home)** ☐☐☐ - ☐☐☐☐☐☐☐

Tel. (Mobile) ☐☐☐ - ☐☐☐☐☐☐☐

e-mail

Section E

Would you like to sponsor a newcomer? Yes ☐ **No** ☐
(if yes, please include the appropriate sponsoring amount)

Seminar fee: RM ..... **Donation: RM** ..... **Total Amount: RM** .....

Note: Would you like to volunteer? Yes ☐ **No** ☐

For office use only:
Receipt No: _____
Date: _____

***ESM -** ECKANKAR Satsang Malaysia Bhd