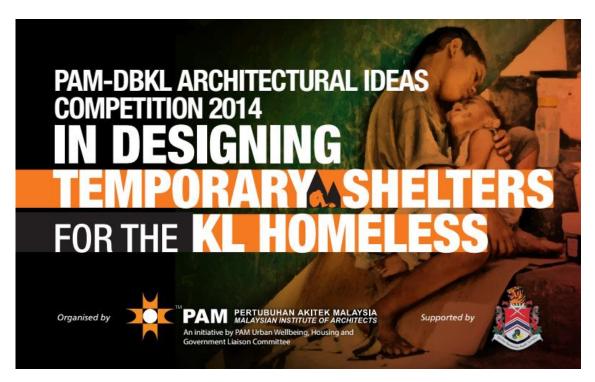


APPENDIX

REGISTRATION FORM

PAM Student Members (Please tick (/) whichever category	Non-PAM Corporate Members / DBKL/LAM/MIP Members y applicable)	PAM Corporate Members	
Name:			
PAM No.:	LAM/MIP No	o.:	
Company/University/College/School:			
Tel No.:	Mobile No.:		
Fax No.:			
Email:			
Signature:			
may also be banked-in to Hong L bank-in slip (with name	should be made payable the should be made payable the should be made when the should be made when the should be made when the should be	o Pertubuhan Akitek Malaysia. Payment 18 60 100 9000 (Please send us copy of fax +603-2692 8782 or email with full payment. For more information,	
Organised by		Supported by	





APPENDIX

DECLARATION FORM

(Important: To be submitted with the submission of entry)

Declaration:

Organised by

I / We have read and understood the COMPETITION agreed to be bound by them.	BRIEF, RULES AND CONDIT	TONS of entry and
I / We declare that I (we) am (are) the author(s) of the	e submitted entry.	
SIGNED:	DATE:	
NAME OF REGISTERED PARTICIPANT:		
** OTHER TEAM MEMBERS:- (IF APPLICABLE)		
NAME		
1		
2		





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