



Asia Pacific School Psychology Association

1st Floor Menara Manickavasagam, Jalan Rahmat,
50350 Kuala Lumpur, Malaysia

Mail us: apspa2019@gmail.com Visit us: www.apspa.info

Photo to
be Pasted

Life Membership Application 2019

Sl. No.	Particulars	
1	Name	
2	Date of birth	
3	Gender	Male/Female
4	Educational Qualifications (mention highest only)	
5	Designation and address of the institution (Kindly give communication address with PIN code)	
6	Email ID	
7	Mobile Number/ WhatsApp Number	
8	Country in Which you are representing	
9	Membership details of School Psychology Association in your country	Member No. year: Name of the Association:
10	Area of Interest	
11	Payment details of the membership	USD 200
12	Any other information	

Kindly enrol myself as Life Member of the Asia Pacific School Psychology Association (APSPA).

Date:
Place:

Proposed by a
office bearer of the APSPA

Signature

For the use of APSPA Secretariat only

Membership Fee paid:

Receipt No.....dated.....

Membership No.....

President
APSPA