

Individual Member (Processing Fee RM10 per head)
 Corporate Member (Processing Fee RM10 per head)
TOTAL HEALTH & WEALTH SOLUTION SDN. BHD. (421851T)



HEALTH & WEALTH
SMART CARD MAKE YOUR LIFE MEANINGFUL

TOTAL HEALTH & WEALTH APPLICATION FORM

Please tick in the boxes as where applicable. For others, to delete as where not applicable. To complete the form in Capital Letters and in Black Ink
 Sila tanda pada kotak yang berkenaan. Bagi lain-lain, sila batalkan jika tidak berkenaan. Sila isi borang dengan Huruf Besar dan InK Hitam.

1) Particulars Of Applicants / Maklumat Pemohon

a) Full name (as shown on IC/Passport for foriengner)
 Nama penuh (seperti di dalam kad pengenalan/pasport bagi orang asing):

b) NRIC No. (New)/Kad pengenalan (Baru) / Passport No. (foreigner)/No. Pasport (orang asing):

c) Date Of Birth/Tarikh Lahir:
 ___d ___m ___y

d) Nationality/Warganegara:
 Malaysian
 Others _____

e) Mailing Address/Alamat Surat Menurat:

Post Code / poskod _____ State Code / Kod Negeri _____
 Country / Negara _____
 House Tel. No./No. Tel Rumah: _____
 Fax No./No. Faks: _____
 H/P No./No. Tel Bimbit: _____
 E-mail Add./Almt. E-mail: _____

f) Race/Bangsa: Malay/Melayu Chinese/Cina
 Indian/India _____

g) Religion/Ugama: Islamic/Islam Buddhism/Buddha
 Christianity/Kristian Hinduism/Hindu
 Taoism/Taois _____

h) Sex/Jantina Male/Lelaki Female/Perempuan

i) Marital Status / Taraf Perkhawinan:
 Married/Khawin Single/Bujang

j) Name of Spouse (if married) Nama Suami/Isteri (Jika berkhawin):

k) No. Of Children/Jumlah Anak: _____

l) Medium of Communication:
 English/Inggeris Mandarin/Mandarin
 Malay/Malayu Tamil/Tamil

m) Highest Education Attained:
 SPM/MCE STPM/HSC
 Diploma Degree/Saujana Muda
 Master/Sarjana _____

n) Employment Status:
 Self-Employed/Berniaga Employee/Berkerja
 Pensioner/Bersara _____

o) Total Income Per Month / Jumlah Pendapatan Bulanan:
 Below/Kurang Dari RM1500 Between/Dari RM6000-10,000
 Between/Dari RM1500-3000 Between/Dari RM10,000-15,000
 Between/Dari RM3000-6000 Above/Lebih Dari RM15,000

2) Company Particulars/Maklumat Syarikat:

a) Co. Name>Nama Syarikat:

a1) Position Held/Jawatan:

b) Mailing Address/Alamat Surat Menurat:

Post Code/Poskod: _____ State Code/Kod Negeri: _____
 Tel. No./No. Tel: _____
 Fax No./No. Faks: _____
 E-mail Add./Almt. E-mail: _____

3) To provide better service, please tick at allocated boxes below for your needs of financial and investment objective; Untuk memberi perkhidmatan yang lebih berfaedah kepada anda, sila tanda di kotak bawah yang berkenaan:

Personal Related	Degree of Priority/Tahap Kepentingan		
	High/Tinggi	Medium/Moderat	low/Rendah
Income Replacement Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child Education Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retirement Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conventional or Islamic Trust & Estate Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Investment Planning (Local & Overseas)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mortgage Cancellation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Life Insurance & Takaful Family Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business Related			
Keyman Protection Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shareholders' Buy-Sell Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business Succession Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business Loan Cancellation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employees Benefits Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retirement Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Insurance & Takaful General Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note - State Code / Nota - Kod Negeri:

A - Kuala Lumpur B - Selangor C - Pulau Pinang D - Perak E - Negeri Sembilan F - Melaka G - Johor H - Pahang I - Kelantan J - Terenganu
 K - Sarawak L - Sabah M - Kedah N - Perlis O - Labuan P - Putrajaya Q - Others/Lain-lain _____