



INSTITUT ARKITEK LANDSKAP MALAYSIA
Institute of Landscape Architects Malaysia
Peperiksaan Amalan Ikhtisas Arkitek Landskap Siri 2/2018
REGISTRATION FORM

- Please send the completed Registration Form to :
SEKRETARIAT KAIAL 2018
Institut Arkitek Landskap Malaysia (ILAM)
1-10-3, Presint ALAMI, Pusat Perniagaan Worldwide 2,
Persiaran Akuatik, Seksen 13,
40100 Shah Alam, Selangor Darul Ehsan.
Email : ilamalaysia1981@gmail.com
- Attendance is confirmed by Payment. All payment must reached to SEKRETARIAT KAIAL 2018 at the address above not later than **24 October 2018 (Wednesday)** or email /scan /faxes to ilamalaysia1981@gmail.com.

Name :	I/C No :
Home Address :	
Tel : H/P:..... E-mail:.....	
Office Address :	
Tel : Fax :	
Year of Graduation:	<input type="checkbox"/> UTM <input type="checkbox"/> UiTM <input type="checkbox"/> UPM <input type="checkbox"/> UiAM
	<input type="checkbox"/> Others:
Degree: 1	
2	
Date of Registration as ILAM Graduate Member:	
I wish to register for:	
<input type="checkbox"/>	THE PROFESSIONAL EXAMINATION FOR LANDSCAPE ARCHITECTS SIRI 2/2018 RM 200.00
* As evidence kindly attach : KAIAL Course Certificate / KAIAL Photo / Payment Receipt (KAIAL Course)	
Year attended KAIAL Course :	
Please find enclosed my payment Ringgit Malaysia:.....	
Fees paid are not returnable. DO NOT send Cash by mail.	
<input type="checkbox"/>	Cash
<input type="checkbox"/>	Cheque No:
<input type="checkbox"/>	local Order
<input type="checkbox"/>	Bank in to ILAM Account No. CIMB (UPM) 8002154176 – INSTITUT ARKITEK LANDSKAP MALAYSIA
Signature :	Date :
Acknowledgement of Receipt.	
<u>Office Use Only</u>	
Receipt No :	Registration No :
Date :	Received By :