



Marine Surveyors Association of Bangladesh (MSAB)

Est: 1994

MEMBERSHIP FORM		PHOTO
To be filled by the member. Signed copy to be issued for office record.		
Name		
Date of birth	NID number:	
Contact number	Email id:	
Address		
Spouse name		
Emergency contact no		
Surveyor's certificate number		
Date of issue		
Date of expiry		
Last sailed onboard date & Ship		
	Name	Signature
Proposer:		
Secunder:		
I do hereby declare that my above information is correct and being a member of the association, I will follow all rules, regulation and code of conduct of the association and be obliged.		
Signature of member		
Membership approval team:		
	Name	Signature
EC Member		
EC Member		
EC Member		
EC Member will verify and ensure applicant Surveyor's license, work experience, an under-taking related to code of conduct and assurance not to sail ship within 6 months.		

To be filled after approval by office only:

MSAB ID NUMBER		
Membership fee amount:		Receipt no.:
Date of being as a member		
Signature of President: _____	STAMP	

For future use: (Use additional page for record)

Renewal of membership :	
Date	Amount and fees for the year

Withheld of membership :

Date	Reason of withheld (Add additional pages if required)	Signature

Cancellation of membership :

Date	Reason of cancellation (Add additional pages if required)