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Name .....

Former School: .....

House Address: .....

.....

Membership No: .....

Date of Retirement: .....

*(Optional/Compulsory)*

Telephone No: : .....

Date: .....

The Board of Directors  
Koperasi Guru Pulau Pinang Berhad  
No: 1-G King Street  
10200 Pulau Pinang

Dear Sir/Madam

**RE: APPLICATION TO CONTINUE MEMBERSHIP**

As I have since retired from the teaching profession, I would like to apply to continue my membership with this Co-operative.

\* 1. I wish to stop my subscription payment but to retain my credit balances with the Co-operative

or

\*2 I hereby undertake to remit payment of my loan principal / loan interest / insurance premium to the Co-operative

Your kind consideration and approval is greatly appreciated

Yours faithfully,

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*\* Please delete whichever is applicable*