

MEMBERSHIP ADVISOR INFORMATION

## MEMBERSHIP PAIRING REPLACEMENT APPLICATION FORM

Please make sure to fill in all the below columns and submit it to the HQ of MXM International or any of our branches/submission centers.

| Full Name as in IC. / Company Name | : |
|------------------------------------|---|
| New NRIC No.                       | · |
| Advisor ID                         | · |
| Telephone No.                      | · |
| Email Address                      | : |
|                                    |   |
| EXISTING MEMBERSHIP PAIRING        |   |
| Principal Program Holder's Name    | : |
| Membership ID                      | : |
|                                    |   |
| NEW MEMBERSHIP PAIRING             |   |
| Principal Program Holder's Name    | : |
| Membership ID                      | : |
| New NRIC No.                       | : |
|                                    |   |
|                                    |   |
|                                    |   |
| (Signature of Applicant)           |   |
| Name of Applicant : Date :         |   |
|                                    |   |

Special Notes:

The membership pairing of a membership advisor account can only be replaced by:

- a **NEW** Adult MediSavers Membership Principal Program
- submitted in the current production month, and
- it must be under the same hierarchy as the membership advisor account.