SRI KOTA
SPECIALIST
MEDICAL CENTRE
The Heart of Healthcare

SENIOR CITIZEN PRIVILEGE PROGRAM

Membership Enrolment Form

Name :

Salutation : Mr ☐ Mrs ☐ Ms ☐ Others ☐

Date of Birth : ☐☐ / ☐☐ / ☐☐ (dd/mm/yy)

IC No : ☐☐☐☐☐☐ - ☐☐ - ☐☐☐☐

Gender : Male ☐ Female ☐

Race : Malay ☐ Chinese ☐ Indian ☐ Others ☐

Address :

Postcode : ☐☐☐☐☐

Contact No : Office ☐☐☐ - ☐☐☐☐☐☐☐☐

HP ☐☐☐ - ☐☐☐☐☐☐☐☐

Email :

Benefits :

In-Patient :

10% discount on all room charges
5% discount on Hospital charges including physiotherapy laboratory service.
(Excluding Imaging Services, stents and implants)
5% discount on MRI & CT Scan

Out-Patient :

10% discount on wellness screening program
10% discount on medication
5% discount on physiotherapy & laboratory Services
5% discount on MRI & CT Scan

Term & Conditions :

- Benefits are applicable to cash and credit card patients only
- For patients above 60 years old only
- Not allow to use with any other discount or promotions
- Valid for TWO year from date of issue
- This discount card is non-transferable
- Please present this card during registration
- Card replacement will be charged RM5.00

Note : The personal data you provide would be obligatory for Sri Kota to retain, process & use it for marketing & promotion purposes.

(For office use only)

Membership No : ☐☐☐☐☐☐☐☐☐☐

Date : _____

Issuing Dept. / Level : _____

_____

Applicant Signature