



**Sabah Museum Application Form  
Copy of Video/Audio/Photo/Slide**

JMNS:

Name of applicant: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Cell: \_\_\_\_\_

Purpose: \_\_\_\_\_

\_\_\_\_\_  
(Signature)

Name:

Date

**List of Items ( Please fill the following)**

Video: \_\_\_\_\_

Audio: \_\_\_\_\_

Still Photo (Colour): \_\_\_\_\_

Slide (Colour): \_\_\_\_\_

**For Official Use:**

Total Amount:RM \_\_\_\_\_

Mode of Payment: \_\_\_\_\_

Number Receipt: \_\_\_\_\_

Date: \_\_\_\_\_

Nos. of Application: \_\_\_\_\_

Nos of Approved: \_\_\_\_\_

\_\_\_\_\_  
Head of Account Unit

Date:

\_\_\_\_\_  
Name

Head of Exhibition Section

Date:

Phone: 088 - 225033 ext: 203

Fax: 088 - 240230

E-Mail:

Action taken by:

Date:

**Regulation:**

1. Application should be submitted two weeks in advance.

2. Due to high demand from our guests, the application will be given on a first-come first-serve basis.
3. This form can be downloaded from our website at: <http://www.museum.sabah.gov.my>
4. Please submit the complete form to the Information Counter, Sabah Museum Complex.  
E-mail: or fax : 088 - 240230
5. Payment must be made prior to the delivering.
6. Terms and condition apply.
7. Further informtion,please contract to the Head of Exhibition Section.  
Email:Robin.Miasin@sabah.gov.my  
Phone: 088 - 253199 / 225033  
Fax: 088 - 240230