

# Nepal NCD Alliance

Pulchowk, Lalitpur, Nepal

## Membership Application Form (For Individual)

Name: .....

Occupation:

.....

Name of Affiliated Organization: .....

Name of Affiliated Journal/Newspaper: .....

Address (Office): .....

Telephone No. (Office): ..... Mobile: .....

Email: .....

Membership category: Please tick: 1. General member

2. Life member

3. Distinguished member

*I/We abide by the rule & regulation of Nepal NCD Alliance.*

Name: .....

Signature: .....

Date: .....