

# Nepal NCD Alliance

Pulchowk, Lalitpur, Nepal

## Membership Application Form (For Organization)

Name of Organization: .....

Year of Establishment: ..... Regd. No.: .....

Name of Chairperson/President: .....

Address (Office): .....

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

Email: .....

Representative to Nepal NCD Alliance from this organization: .....

.....

Designation: .....

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

Name: .....

Designation: .....

Signature: .....

Date: .....

Official Stamp