

# NGO Membership Registration Form

## Membership Information:

- Full Name: \_\_\_\_\_
- Date of Birth: \_\_\_\_\_
- Gender:  Male  Female  Other
- Address: \_\_\_\_\_  
\_\_\_\_\_
- City/State/Zip Code: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_

## Membership Type:

- Lifetime Membership
- Annual Membership
- Volunteer Membership

## Areas of Interest:

- Fundraising
- Event Management
- Field Work
- Research and Development
- Other: \_\_\_\_\_

## Skills and Experience:

Skill	Years of Experience	Certification (Yes/No)	Remarks


I agree to abide by the rules and regulations of the NGO.

**Signatures:**

- **Applicant Signature:** \_\_\_\_\_
- **Date:** \_\_\_\_\_