

# KENYA NATIONAL ASSOCIATION OF PROBATION OFFICERS

P. O. Box 6104-00100 GPO, NAIROBI-KENYA. Tel. 07xxxxxxx

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## CORPORATE MEMBERSHIP APPLICATION FORM

### A. ORGANISATION INFORMATION

Please fill the form in block letter and submit to KNAPO.  
Attach Certificate of Registration and Organization  
Profile.

**MEMBERSHIP  
NUMBER**

OFFICIAL USE ONLY

Name of the Company:

Date of Registration:

Postal Address:

Telephone Number:

Organization Email Address:

Organization Website:

Date of Establishment:

Principal Activity:

### B. DECLARATION

I wish to apply for Corporate Membership and agreed to abide by the Constitution, Rules and Guidelines of KNAPO, and that I am bound to pay annual subscription fees unless expelled from the association or having submitted in writing to the KNAPO Secretariat before the annual subscription is due.

Name:

Position:

Signed:

Date:

### C. OFFICIAL USE ONLY

Approved by  
(Chairperson/Secretary):

Date of Admission:

Signed (Chairperson/Secretary):

Date of Cessation:

Signed (Chairperson/Secretary):