



**NON-GOVERNMENTAL ORGANISATION BOARD  
APPLICATION FOR RESERVATION OF NAME OF ORGANISATION**

To the Executive Director,  
NGOs Co-ordination Board,  
P.O.Box 44617 -00100  
NAIROBI.

I,.....  
(Full Names)

of.....  
(Address)

request your approval to register a Non-Governmental Organisation in any of the following names:

1. ....
2. ....
3. ....

Signature of applicant.....

Dated.....20.....

**FOR OFFICIAL USE ONLY**

Rejected / Reserved / Approved  
Reasons:

.....  
.....  
.....  
.....  
.....

(Signed).....

**Executive Director / Non-Governmental  
Organisation Co-ordination Board**

**Fee: Kshs. ....**

GPK-5834 IM-6/93

**NOTE: NAME RESERVATION IS VALID FOR 60 DAYS ONLY**