

REGISTRATION FORM FOR VOLUNTEER ORGANISATIONS

1. Name _____
2. Organisation _____
3. Nature of organisation _____ (National/International)
4. Type of organisaiton _____ (NGO/Corporate Body)
5. Address _____
6. City _____
7. District _____
8. State _____
9. ZIP/Pin code _____
10. Phone No. Area code _____ Number _____
11. Mobile No. _____
12. Fax No. Area code _____ Number _____
13. Email _____
14. Year of establishment _____
15. Area of operation _____ (Block/District/State/All India)
16. Main area of interest _____

(Consultancy/Emergency response/equipment/funding/public awareness/relief material/rehabilitation/training)

17. Specialisaton _____

(Construction/fire/medical/relief/R&D/SAR/Shelter/sanitation/transportation)

18. Manpower _____
19. Equipment/facility _____

20. Salient Activities

(over the past three years – attach proof)

21. Services offered

Paid_____ Free_____

22. Paid details

Signature of the applicant

Designation