

NOMINATION FORM

Please enroll:		
Name of participant:		
Conference Title:		
Dates:	to:	
Organization details		
Name:		
Physical address:		
Postal Address:		
Postal Code:	Town/City:	
Country:		
Telephone Number:		
Email:		
Participant details		
Title (Mr/Mrs/Ms/Dr, etc.):		
Highest academic qualification:		
Position held:		
Office Tel Number:		
Mobile Number:		
Email:		
Name and Signature of Nominating Authority		
Signed By (Kindly affix OFF	Signature CIAL STAMP)	
NOTE: Please note that payme	t is upfront Date:	

(PLEASE FILL AND MAILTO: nqimembership@kebs.org; copyto:mutungam@kebs.org)



KENYA BUREAU OF STANDARDS <u>KENYA</u> BUREAU OF STANDARDS - BANK DETAILS

PAYMENTS CAN BE MADE TO THE FOLLOWING ACCOUNTS KENYA SHILLINGS ACCOUNT

Account Name: Kenya Bureau of Standards

Account Denomination: KES

Account Number: 0100302830600 SWIF T CODE: NBKEKENXXXX

Bank: National Bank of Kenya

Bank Code: 12

Branch: Harambee Avenue - Head Office

Branch Code: 003

Address: P. O. Box 41862, Nairobi.

MPESA

Paybill Number 804700 Account Number 10150

DOLLAR ACCOUNT

Account Name: Kenya Bureau of Standards

Account Denomination: Dollar

Account Number: 0200302830600 SWIF T CODE: NBKEKEN

Bank: National Bank of Kenya
Branch: Harambee Avenue

Address: P. O. Box 41862, Nairobi