KENYA ASSOCIATION OF PHYSICIANS

P.O. BOX 48397, CODE 00100 GPO NAIROBI

E-MAIL: info@kapkenya.org WEBSITE: www.kapkenya.org

HON. CHAIRMAN: DR. FELIX BARASA

HON SECRETARY: DR. CAROLYNE LUSWETI

HON TREASURER: DR. EVANS MANUTHU

SPECIFY MEMBERSHIP CATEGORY

ORDINARY STUDENT CORPORATE PRIVILEGED ASSOCIATE

TITLE: ————————————— SURNAME—————————————————————

OTHER NAMES:————————————————————————————————————

CORPORATE NAME:—————————————————————————————————

POSTAL ADDRESS:——————————————————————————————————

PHYSICAL ADDRESS:—————————————————————————————————

CELLPHONE NO: -------------------------------------------------------------------------------

E-mail:—————————————————————————————————————————

MP&DB (OR EQUIVALENT) REGISTRATION NUMBER:———————————————

QUALIFICATIONS:———————————————————————————————————

DATE:——————————————————————-SIGNATURE————————————-

PLEASE FORWARD THE COMPLETED FORM AND PAYMENT TO THE HON. TREASURER. RECEIPT WILL BE ISSUED TO YOU. OFFICIAL USE: MEMBERSHIP NUMBER—————————

OFFICIAL RECEIPT NUMBER:——————— MEMBERSHIP CATEGORY CHARGES:

ORDINARY: ———KSH. 5000. STUDENT:( Undergraduate/Postgraduate)—KSH. 1000.

CORPORATE:——-USD. 500. PRIVILEGED——No Charge. ASSOCIATE: USD 100.

**Lipa Na Mpesa Paybill No. 600100 Acc. No. 0100005591699**