



INTERNATIONAL SOCIETY FOR KNOWLEDGE
ORGANIZATION KENYA

Application to become an Institutional Member of ISKO Kenya

PLEASE COMPLETE THIS FORM, SIGN IT AND RETURN TO:

ISKO KENYA

Phone: +254-704-634154

Email: hello@iskoke.org

Name of organization	
Address of organization	
Type of institutional membership (1-5 nominees; 5+ nominees)	
Name of authorized representative	
Position of authorized representative	
Date of Birth of authorized representative	
Contact Phone No	
Contact Email	
Names and emails of organizational nominees (for membership communications)	

I have read the Constitution of ISKO-KE downloadable from <https://iskoke.org/resource/iskoke-constitution> and understand the rights and privileges of an Individual Member.

I understand that Institutional Membership is for 12 months from the payment of the annual membership fee.



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I wish to apply for Institutional Membership of ISKO on behalf of my organization.

Privacy statement: we will only use your personal information for the purposes associated with ISKO membership communications.