



Nigeria Internet Registration Association

E-Mail: [admin@nira.org.ng](mailto:admin@nira.org.ng);

Website: <http://www.nira.org.ng>

## Membership Application Form

### Section A

Your .ng Domain Name:

Name:

Address:

Telephone (Fixed):

Telephone (Mobile):

E-Mail (Primary):

E-mail (Alternate):

Type of Applicant:(Tick As Appropriate)

Individual Applicant:

☐

Institutional Applicant:

☐

### Section B

Personal Information (For Individual Applicants or Contact person for Institutional Applications)

Sex:

Date of Birth:

Nationality:

State Of Origin:

Profession:

Official Designation:

Work/Office Address: (Please, provide street and postal addresses)

*Identification (Applicants should attach a scanned copy of identification document to this application. Acceptable documents are any of Personal Data Page of a Valid International Passport; Valid Driver's Licence or National Identity Card).*

Please tick as appropriate:

International Passport: ☐

Drivers License: ☐

National Identity Card: ☐

## Section C (Institutional Applicants Only)

Name of Company/Institution/Agency:

Company Registration No. /Act establishing Institution or Agency:

Date Of Incorporation/ Registration /Establishment:

Nature of Business

Street Address:

City:  LGA:  State:

Telephone Nos:

Fax.:

E – Mail:  Website

*Identification (Institutional applicants should attach certified copy of Certificate of Incorporation or Business Registration with the Corporate Affairs Commission or Act establishing the Institution or Agency).*

Please Tick As Applicable.

Certificate of Incorporation: ☐

Business Name Registration: ☐

Act Establishing Agency/Institution: ☐

## Section D (All Applicants)

Referees: (Must be NiRA members)

1.

Name:

Address:

Occupation:

Contact Phone No.  
(Fixed and/or Mobile):

Seal or Stamp:  Sign. & Date:

## Section E (All Applicants)

Affirmation:

I,  In my personal capacity / Representing

Duly affirm that the information given is true. If discovered otherwise, the Nigeria Internet Registration Association reserves the right to evoke applicable penalties.

☐ I agree to the [Constitution of NiRA](#) and consent to the processing of my personal data in compliance with the [NiRA Privacy Policy](#)

Signature:

Date: (DD/MM/YY):

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### For Official NIRA Use Only

Membership	Membership Fees
Status: Admitted:	Fully Paid
Pending:	Pending:

*Terms And Conditions Apply*