



MOORING MASTER & SHIP PILOTS ASSOCIATION OF NIGERIA MEMBERSHIP APPLICATION FORM

Add:1B, Senator Muse Road Off Oduduwa Apapa GRA, Lagos, Nigeria. Tel: +234 8022 785 974

PERSONAL INFORMATION

Full Name:	Date of Birth:		
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Other
Phone Number:	Email Address:		
Street Address:			
City:	State/Province:		
Pilotage Organisation- Service-Employer	Occupation:		

MEMBERSHIP DETAILS

Membership Type	Benefits	Annual Fee (\$)
Standard	Let me know benefits for the available categories sir	#
Premium	Let me know benefits for the available categories sir	#
Lifetime	Let me know benefits for the available categories sir	#

Select Membership Type: Standard Premium Lifetime

PAYMENT INFORMATION

Payment Method: Credit Card Debit Card Bank Transfer Check

Qualification (COC-Certificate of Competency), Years of Pilot experience and Current status (employed or Not/ freelance availability) Memebership type/ Class should be defined (Full, Associate and etc):

Deck Officer Experiences (If Applicable):

Pure Coastal Apprenticeship Years And Mentorship Details:

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ADDITIONAL INFORMATION

How did you hear about us? Friend Advertisement Social media Other

Reason for Joining: Networking Social Events Interest Groups Other

DECLARATION AND SIGNATURE

I, _____, hereby declare that the information provided is true and complete to the best of my knowledge. I agree to abide by the rules of **Mooring Master & Ship Pilots Association Of Nigeria** and regulations. I understand that any false information may result in the denial of membership or termination if already accepted.

Signature: _____

Date: _____

SUBMISSION INSTRUCTIONS

- Please review all information before submitting your application.

Disclaimer:

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