



Nigerian Army Resource Centre  
 Mambilla Barracks Junction  
 Off Maitama Avenue  
 Asokoro – Abuja  
 E-mail: narc.admin@narc.org.ng  
 Phone: 09054244469  
 07057473811

**INDIVIDUAL MEMBERSHIP APPLICATION FORM**

**Instructional Note:** (Section A – C to be completed by the prospective member).

- a. Provide all the information required.
- b. If any entry is not applicable, No or Nil should be inserted.
- c. Where document(s) are required only photocopies are to be attached.

**SECTION A**

**Prospective Member's Details**

Rank/Title..... Service Number.....

First Name..... Middle Name.....

Last Name (Surname).....

Gender: Male  Female  Date of Birth.....

Marital Status: Married  Single  Divorce  Widow/widower

State..... LGA..... Home Town.....

Nationality..... Place of Birth.....

Membership of Organization/Associations.....

Qualification: HND/Bsc  Msc  PhD  Other.....

Name of School.....

Year of Graduation..... Occupation.....

Office Address.....

Last 3 Units served (Officers) Last 3 appointments and dates (Civilians):

(1)..... From..... To.....

(2)..... From..... To.....

(3)..... From..... To.....

Residential Address.....  
Permanent Home Address.....  
Phone Number..... Email.....  
Hobbies.....

**SECTION B**

**Confirmation by the Applicant's Employer**

**Employer's Details:**

Name of the company/organization.....  
Address of the company.....  
.....  
Employer's Name.....  
Rank/Title..... Appointment.....  
Recommendations.....  
.....  
Signature..... Date..... Stamp.....  
Phone Number..... Email.....

**SECTION C**

**Referees.** Two referees are to endorse this form one of whom must be a member of NARC for a civilian while the Commander/Commanding Officer must endorse an officer's form.

a. Organization/Institution.....  
Address.....  
Name.....  
Rank/Title.....  
Appointment.....  
Recommendations.....  
.....  
Signature..... Date..... Stamp.....  
Phone Number..... Email.....

b. Organization/Institution.....  
Address.....  
Name.....  
Rank/Title.....  
Appointment.....  
Recommendations.....  
.....  
Signature..... Date..... Stamp.....  
Phone Number..... Email.....

**DECLARATION BY APPLICANT**

I ....., declare that the foregoing information is correct and completed to the best of my knowledge and belief. I understand that any false statement or omission may render my membership of NARC denied or cancelled.

Signature..... Date.....

***(Please remit payment to NARC Account: Sterling Bank: Account No 0061426499)***

**SECTION D**

**Remarks/Recommendations:**

a. **NARC MIR Unit/Dept:**

Brief Remarks .....

Recommendations.....

Signature..... Date..... Stamp.....

b. **NARC Legal Unit/Dept:**

Brief Remarks .....

Recommendations.....

Signature..... Date..... Stamp.....

**FOR OFFICIAL USE**

Eligibility.....  
Remarks, if any.....  
Membership Number Allotted.....  
Payment Receipt Number.....  
Signature of Approving Officer..... Date.....

<b>Annual Membership Fee - ₱10,000.00</b>
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