



NGO Committee on  
**Migration**

**Membership Form**  
**(1 September 2024 - 31 August 2025)**

Date: \_\_\_\_\_

**Organization Name**

**Organization ECOSOC Status:**    **General**        **Special**        **Roster**        **DPI**        **None**

**Representative's Name**

**Representative's E-Mail**

**Phone Number**

**Address**

**Regional Focus** \_\_\_\_\_

**Issue Focus**

DESCRIPTION	AMOUNT
Membership dues	<u>    \$50    </u>
Donation	<u>          </u>
Total	<u>=====</u>

Please make check payable to:    NGO Committee on Migration  
  C/O Nermin K. Ahmad, Treasurer  
  125 W 110th Street, Unit 7B,  
  New York, NY, 10026

**NGO Committee on Migration**

Received from

Name of Person Providing the Dues

Organization's Official Name

Sum of \$

Cash\_\_\_\_\_

Check#\_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Treasurer