

Bulk SMS Service Application Form for Non-Profit Organizations

Organization Name

Registered Address

Contact Person Name

Designation

Email Address

Phone Number

Organization Details

Registration Number

Year of Establishment

Type of Organization

Website

Service Requirements

Intended Use of Bulk SMS Service

Estimated Monthly SMS Volume

Sender ID Preference

Target Audience Description

Additional Requirements / Notes

Declaration

☐ I certify that the information provided above is true and accurate.

