GIS TRANSPORT LTD

Entry Submittal Form

NCA Cartographic Competition, General Div. 2025

Complete and scan and send file to: **nigeriancartographers@gmail.com**

Map Editor: Dr IE Bello, 08037369829, 09029486827

Application Date: Day / Month / Year NCA Membership No._____

Name: _____ _____ _____ _____
Title Surname First Other

Age: _____ Birth Date: Day / Month / Year

Phone No. _____ Phone No. _____

Email Address: _____

Street Address: _____ Community: _____

City: _____ State: _____ LGA: _____

Professional Status:

Organization or Company _____ _____
Employ Position / Role

_____ _____
City State

Brief Description of Map Entry: _____

_____

_____

Applicant Signature: _____