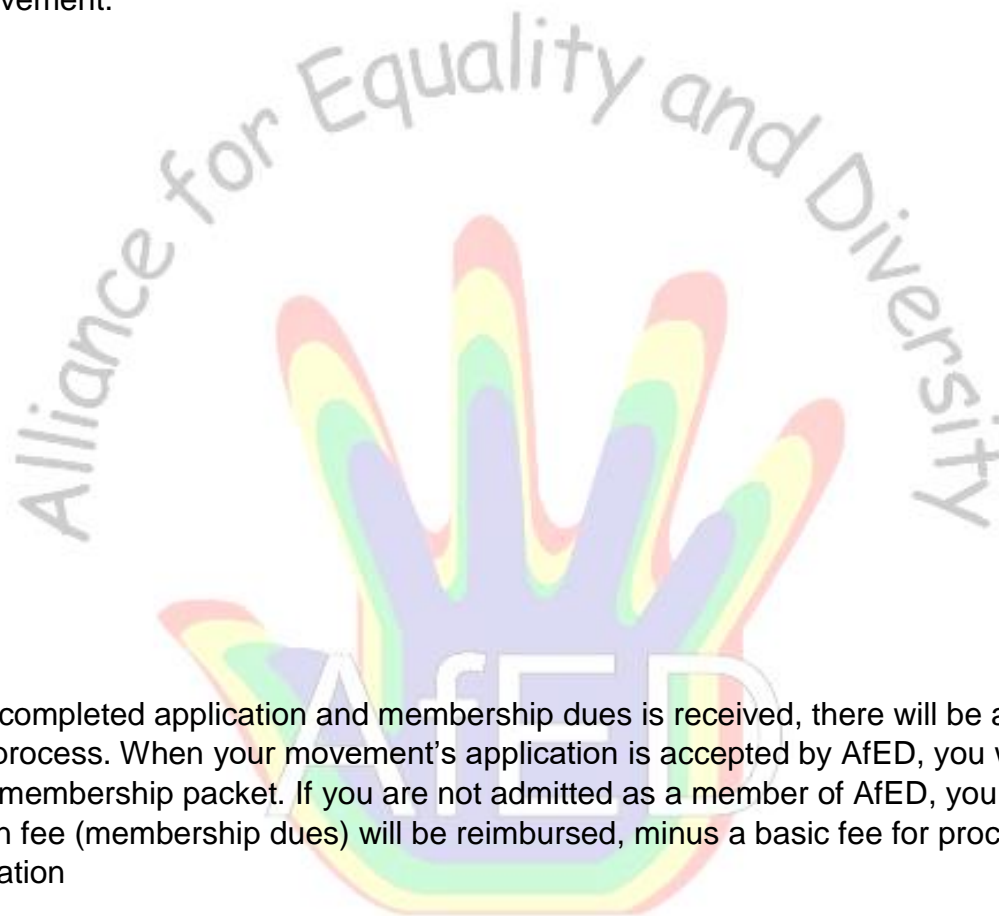


Membership Responsibility

- ✚ To be an ambassador for AfED at the respective regional level and an advocate for global human rights
- ✚ To actively participate in meetings and events regularly
- ✚ To pay your annual dues on time
- ✚ To maintain professional conduct by treating fellow members with respect and courtesy

To Join AfED

1. Complete this form and submit it via email to secretariat@afedghana.org
2. The application should be authorized by the President and two executives of the movement.



Once the completed application and membership dues is received, there will be an approval process. When your movement's application is accepted by AfED, you will receive a membership packet. If you are not admitted as a member of AfED, your application fee (membership dues) will be reimbursed, minus a basic fee for processing the application

Please direct all enquiries to the AfED secretariat on:

Tel number: +233 302 736 714 / +233 202 862 132

Email address: secretariat@afedghana.org

Physical address: Plot 1

3rd Oloti Street

La Wireless, South Cantonment

Accra - Ghana

ALLIANCE FOR EQUALITY AND DIVERSITY (AfED) REGIONAL MOVEMENT MEMBERSHIP APPLICATION FORM

(Please read each question carefully and mark the appropriate box or fill the blank spaces in ENGLISH)

MOVEMENT'S INFORMATION

Name of Movement (Please type or print clearly)

Region where movement is located

Year founded

Headquarters mailing address

Headquarters physical address

Telephone number

Fax

Email address

Mission statement

Vision statement

Number of members in the movement

REPRESENTATIVE'S INFORMATION

PRESIDENT

First name(s)

Last name

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Mailing address

Telephone number

Email address

--	--

SECOND EXECUTIVE (VICE-PRESIDENT)

First name(s)

Last name

--	--

Mailing address

Telephone number

Email address

--	--

THIRD EXECUTIVE (SECRETARY)

First name(s)

Last name

--	--

Mailing address

Telephone number

Email address

--	--

ANNUAL MEMBERSHIP DUES

GH 100.00

Payment details

MOBILE MONEY

CASH

Mobile money (MOMO)

MTN – 055 313 3577

VODAFONE – 020 286 2132

(Movement's name as reference)

Name of President *(Completing this form)*

(I am an authorized representative of this movement and I affirm that all information submitted on this form is true and accurate)

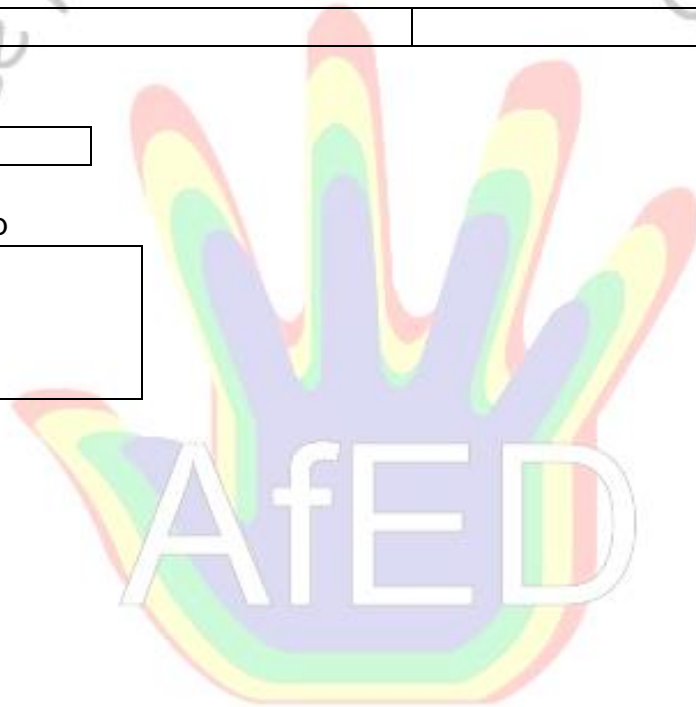
First name(s)

Last name

--	--

Date

Signature and stamp



OFFICIAL USE ONLY

Application Received Date

Application statuses

Approved

Declined

AfED President/ General Secretary



Note: Membership is activated only when dues are received and application is approved by the President/ General Secretary. If you are not admitted as a member of AfED, your application fee (membership dues) will be reimbursed, minus a basic fee of GH 30.00 for processing the application.