CL-GEYEF MEMBERSHIP REGISTRATION FORM

PERSONAL BIODATA:

Full Name	

Please surname first

sex	male		female		Marital status	

Residential Address	

Official Address	

Email	

Phone Number	

Occupation	

State of origin	

Reason for membership application	
To act as volunteer for the organization	
To source for fund for the organization	
To act as resource person in seminars/workshops	
Participate in school visitations and youth training program	
Act as trainer in skill acquisition and entrepreneurial development training	
Creation of awareness/advert	
To give monthly financial contribution of	
Others (please specify)	

SECTION B

I pledge to be loyal, honest and committed to the objectives of CL-GEYEF throughout my membership. So help me God.

Applicant signature		Date	

OFFICIAL USE ONLY

Authorized Signature		Status of Membership		Approved date	

Applicant's I.D	

Please download the membership form , fill it , scan and send it as an email to ngo@cl-geyef.org

***N B**: Payment of Membership Fee of N 1000.00 should be made into the organization account and payment details sent to 08131123991*

Account Name: COMPLETE LIFE- GEYEF NGO

Bank Name: Zenith BanK

Account Number: 1015297458