



AFRICAN YOUTH FOUNDATION

Afrikanische Jugendhilfe e. V.

Fondation de la Jeunesse Africaine

Membership Form

Personal Information

Last Name:

First Name and gender:

Date of birth, Nationality:

Residence address
(permanent):

Office address:

Telephone:

Mobile:

eMail:

Profession:

Organisation / Institution

website:

Current Employer
(If applicable):



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My motivation

Please tell us in a few lines why you would like to become a member of AYF's ***Universal Leaders Group***:

I am applying to become an official member of African Youth Foundation's (registered association in Bonn, Germany) ***Universal Leaders Group***.

I am aware that this application is binding

- a) to observing rules and conditions as specified in the ***Universal Leaders Group***'s constitution; and
- b) The membership fee has to be paid to the African Youth Foundation e.V. for the running calendar year. It is 100,- (one hundred) Euros per person with a 50 % reduction for Executive Committee members for the duration of their term of office. The membership fee can be paid in advance for the running year or, in instalments of 10 (ten) Euros per month.

I herewith confirm that all stated information above and on the form's first page is correct.

Place, Date

Full Signature