

# MEMBERSHIP APPLICATION FORM

## AFRICA ARTS ASSOCIATION



### Secretariat Department

P.O.Box : 970 Walvis Bay, Namibia

Email: [africaartsassociation@africaartsassociation.com](mailto:africaartsassociation@africaartsassociation.com)

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Tel: +264 220876

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<b>A</b>	<b>TYPE OF APPLICATION</b>	NEW	<input type="checkbox"/>
		RENEWAL	<input type="checkbox"/>

<b>B</b>	<b>TYPE OF MEMBERSHIP</b>	NATIONAL ENTITY (Non Government Organization) \$100 annually	<input type="checkbox"/>	Payments can be made by Bank to:  <b>Accounts Name: AFRAA</b> Account Number : 2000452092 Branch Code: 481-972 Swift Code: BWLINANK  Bank Windhoek Branch, Namibia
		ASSOCIATE MEMBER \$10 annually	<input type="checkbox"/>	
		INTERNATIONAL AND REGIONAL NGO'S \$50 annually	<input type="checkbox"/>	
		INDIVIDUAL MEMBER (friend of AFRAA) \$10 annually	<input type="checkbox"/>	

<b>C</b>	<b>APPLICANT DETAILS</b>	NAME	_____
		ADDRESS	_____
		WEBSITE	_____
		PHONE	_____
		FAX	_____
		E-MAIL	_____
		STATUS (If organization)	_____

<b>if organization</b>	NAME OF PRESIDENT/CHAIRPERSON	_____
	NAME OF REPRESENTATIVE TO AFRICA ARTS ASSOCIATION	_____
		_____
		_____

<b>D</b>	<b>ACTIVITIES</b>	<i>(short description of organization or CVs of individual)</i>
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<b>E</b>	<b>DATE APPLICATION</b>	DAY	MONTH	YEAR
		_____	_____	_____

<b>F</b>	<b>NAME AND SIGNATURE</b>	NAME	SIGNATURE
		_____	_____

The red fields are mandatory. Please send the original form back to the Secretariat. Via email [afraasecretary@africaartsassociation.com](mailto:afraasecretary@africaartsassociation.com) or [tinascoenheit@gmail.com](mailto:tinascoenheit@gmail.com)



**AFRICA ARTS ASSOCIATION (AFrAA)**  
 An International Non-Profit Organization governed by Africa Arts Association and  
 International Law

**Secretariat Department**

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 Tel: +264 220876 Fax: +264 221511

E-mail: [africaartsassociation@africaartsassociation.com](mailto:africaartsassociation@africaartsassociation.com) /[africaartsassociation@gmail.com](mailto:africaartsassociation@gmail.com). Website:  
[www.africaartsassociation.com](http://www.africaartsassociation.com)

**MEMBERSHIP APPLICATION FORM**

**FOR ORGANIZATIONS**

**NAME OF ORGANIZATION :** .....

**NAME OF PRESIDENT / CHAIRPERSON :**

ADDRESS : .....

TEL : ..... FAX : .....

EMAIL ADDRESS : .....

**NAME OF CONTACT PERSON :**

ADDRESS : .....

TEL : ..... FAX : .....

EMAIL ADDRESS : .....

**ACTIVITIES / INTERESTS :** .....

**FOR INDIVIDUAL PERSON**

**NAME OF INDIVIDUAL PERSON :** .....

ADDRESS : .....

TEL : ..... FAX : .....

EMAIL ADDRESS : .....

**ACTIVITIES / INTERESTS :** .....

**TYPES OF MEMBERSHIP:**     NEW     RENEWAL

	One year Payment (US\$)	IF YOUR PAYING FOR MORE THAN ONE YEAR, FILL THE AMOUNT IN THE BOXES BELOW RESPECTIVELY
<input type="checkbox"/> (1) National Entity Member (No.of members of organization:.....)	<b>100</b>	
<input type="checkbox"/> (2) Associate Member (No.of members of organization:.....)	<b>10</b>	
<input type="checkbox"/> (3) International/Regional NGO's/Group Member (No.of members of organization:.....)	<b>50</b>	
<input type="checkbox"/> (4) Individual Member	<b>20</b>	
<input type="checkbox"/> (5) Student Member	<b>Free</b>	<b>Free</b>

**Signature** .....

(.....)  
 Applicant

Date: .....

**Nominated / Proposed by** .....

(.....)

Date: .....

**Seconded by** .....

(.....)

Date: .....

**PAYMENT METHOD:**

- Cash
- Bank transfer to:-
  - Account Name: AfrAA
  - Bank Name: Bank Windhoek Brank, Namibia,
  - Account Number: 2000452092
  - Swift Code: BWLINANX

**FOR OFFICIAL USE**

Received (US\$) .....  
(Invoice no:..... Membership Fee Year: ..... )  
Signature .....Date:.....  
(.....)  
Secretariat

Approval at Board Meeting ..... Date .....  
Regional Assembly ..... Date .....  
Signature ..... Date: .....  
(.....)

Form updated by gs on: 30.3.2017

