UAE
Riwruok Eteko

# UGENYA ASSOCIATION - ELDORET

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Riwruok Eteko

P.O. BOX 195-30100, ELDORET | Email: ugenyaassociationeldoret@gmail.com

## MEMBERSHIP APPLICATION FORM

1. Full Names, Mr./Miss/Mrs..... (in block letters) Age……Yrs.
2. Marital Status: Married ☐ Single ☐ Widow ☐ (tick where appropriate)
3. Employment: Employed ☐ S/Employed ☐
4. Residential Location ..... Estate.
5. Introduced to Group by (Name of Member) Mr./Miss/Mrs.....Branch…….
6. Membership status – New ☐ Former member ☐ (tick where applicable)

a) **If former member, please indicate:**
   i. Membership number……
   ii. Branch……
   iii. Reason for leaving the group ……
   ……
   ……..
   iv. Reason for re-joining the group ……
   ……
   …….

**b) If new member or widow please indicate:**
   i. Reason for joining the group ……
   ……
   ……..

c) **Next of Kin**
   Name in full ……...
   Relationship……
   Identification Number……...

I will abide by the laid down rules and regulations as provided in the constitution and any other rules as may be required by the group.

Sign: ……. Date……

7. **Official Use**

Recommendations (Branch Chairman) ……
……

Sign: ……

**Executive Chairman**

Name ……...
Sign: ……... Date ……...
I approve/do not approve. Reasons: ……...
……

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