



SWAGAA Membership Form Ingungu Yematsemba

Please complete this form and return it to SWAGAA with your membership fee (E50.00)

Surname		Name	
Sex		Marital status	
Occupation		New member <input type="checkbox"/>	
		Renewal <input type="checkbox"/>	Membership Number <input style="width: 100px;" type="text"/>
Postal Address	Residential Address	Contact	
		Work	Home
		<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
		Email:	
		<input style="width: 100%; height: 20px;" type="text"/>	
What you can benefit as a member.		In which area(s) are you interested? (please tick appropriate box (√))	
• Free counselling services		• Membership <input type="checkbox"/>	
• Information on SWAGAA		• Campaigns <input type="checkbox"/>	
• SMS's update on SWAGAA's activity		• Research <input type="checkbox"/>	
• First priority on opportunities at SWAGAA		• Fundraising <input type="checkbox"/>	
• Free annual report and IEC material		Any other contribution/skills that you can provide?	
• Can be nominated to the Board if you have the necessary skills			
Applicant signature Date:		For office use only	
.....		Cash received by: Date:	
Recruited through our website		Receipt no. Signature	
(Please make sure that you get your membership number)		Cash <input type="checkbox"/> Cheq <input type="checkbox"/> cheq No.	
		Membership no.	

For more information on SWAGAA contact
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