

AFRICAN COMMUNITIES OF MANITOBA INC. (ACOMI)

Individual Membership Application Form

Please read the ACOMI Constitution, code of Conduct, Responsibilities and Rights before filling this application. **Annual Fee: \$25.00**

Membership Type *(Please check one)*

Individual

Honorary

Friend of Africa

Individual Information

Name:

Address:

Phone (1):

Phone (2):

Phone (3):

Fax:

Email (1):

Email (2):

Website:

Brief Description About Yourself *(e.g.: country of origin, length of stay in Canada, relations with Africa)*

Certification

I certify all information given to be true and complete.

I have read the ACOMI Constitution, Code of Conduct, Responsibilities and Rights

Signature: _____

Date: _____

For Office Use Only

Officer's name:

Method of Payment:

Cheque

Cash

Approval Date:

Financial System – Transaction #:

Account Label/No.:

Please Return Completed Application Form with Membership Fee to one of the following addresses:
ACOMI Resource Centre, 101-421 Kennedy Street, Winnipeg MB. R3B 2N2
African Communities of Manitoba Inc. (ACOMI), 101-421 Kennedy Street, Winnipeg MB. R3B 2N2