

2015 MEMBERSHIP REGISTRATION FORM

Surname: First name(s):

Date of birth: Nationality:

Tel:

Tel:

E-mail: Gender: ☐ M ☐ F

Address:

Occupation:

Date:.....

How did you hear about us? Newspaper Billboards Radio Cultural Events
A friend Former student Other:

How did you hear about us?

Benevolent Member:	Individual 200 Ghc	Couple 250 Ghc	Family 500 Ghc
Cultural Member:	Individual 100 Ghc	Couple 175 Ghc	Family 250 Ghc
Multimedia Library	Individual 50 Ghc	Couple 75 Ghc	Family 125 Ghc
			AF Student Free

Yes, I would like to receive news from Alliance Française d'Accra (tick as many as you like):

by SMS

by email

Signature:

(For internal management only)

Member number:

Photo available: yes no

Library number: