

AFFIX A PASSPORT SIZED PHOTOGRAPH
HERE

KEA-USA MEMBERSHIP APPLICATION FORM

Sir/Madam

Please accept this as my application for membership in KEA (USA) and kindly enroll me as a

member of KEA-USA. I acknowledge that I have read the rules and regulations /By-laws of the KEA (USA) and I agree to abide by them. My particulars are as follows:

1.NAME : _____

2. SPOUSE'S NAME : _____

3. ADDRESS : _____

4. BENEFICIARY'S NAME AND CONTACT _____

5. NAME OF CHILDREN (COVERS A MAXIMUM OF TWO OCCURENCES):

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

6. NAME OF SIBLINGS (COVERS A MAXIMUM OF TWO OCCURENCES):

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

7: NAMES OF PARENTS COVERED

1. _____
2. _____

8: Email ID: _____ Mobile: _____ HOME _____

9: NAME OF NOMINEE/SPONSOR AND RELATIONSHIP (MUST BE AKEA MEMBER):

WITH NOMINEE, AND PHONE: _____

9: KANO CLAN _____

10: LOCATION _____

11: CONTACT PERSON IN KENYA AND PHONE _____

PLEASE SEND COMPLETED AND SIGNED MEMBERSHIP FORMS TO THE ADDRESS BELOW

**Kano Empowerment Association,
3117 Northway Drive, Baltimore MD 21234
OR**

**Scan documents and send as an attachment to the following email address
anvumba93@gmail.com**

TYPES OF FEES:

1. Annual Registration fee Submitted with this application (US\$100.00): Amount paid towards registration
US\$.....
2. Monthly Contribution towards Welfare Scheme (US\$20/Month): Amount paid towards Welfare Scheme at registration
US \$.....

I remit herewith a total of \$ _____ by

CHECK / BANK DRAFT / PAY ORDER NO _____ dated _____ Drawn on

_____ Bank as membership amount in favor of KEA (USA)

Yours faithfully,

Name: _____ Signature _____

Date: _____

FOR OFFICE USE ONLY

Membership approved in the Executive Committee's Meeting dated _____

MEMBERSHIP No. _____ and recorded in the Membership Register on page no. _____

Committee Chairman SignatureDATE.....

Secretary General SignatureDATE.....