

## AFRICAN UNION DAY FOUNDATION MEMBERSHIP APPLICATION

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(Organization name)

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(Address)

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(City)

(State)

(Zip Code)

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(Website)

(Email)

---

(Telephone)

(Fax)

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(Founder)

(Year founded)

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(President)

(Chairman)

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(Secretary)

(Treasurer)

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(Type of Corporation) C, LLC, LP...

(Is it For profit\_\_\_ Not-for-profit\_\_\_)

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(Products/ Services Provided)

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(Community Served)

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(Can organization serve international clients/constituents?)

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(What benefit can Africa drive from the organization?)

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(What are the objectives of the organization?)

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(How many members/Employees)

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(What are the qualifications to be a member of the organization?)

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(Name of the person who filled out this application)

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(Position)

(Today's date)

