

GIRL CHILD NETWORK

MEMBERSHIP FORM

Name of member.....

Nationality.....

Date of birth.....

Home Address.....

Telephone.....

School/College/ Work address.....

Hobbies.....

Sport.....

Awards.....

Can you sing or dance.....

Are you a creative writer.....

Mother Occupation.....

Father Occupation.....

Any deceased parent.....

Year deceased.....

Who is looking after you.....

Education qualifications.....in which grade/form/year are you in?

Do you suffer from any chronic illness.....Give details.....

Do you need counselling on any issue.....

What career do you want to pursue?

How do you like G C N to assist you.....

Do you like to study for a degree or diploma?.....

Do your parents/ guardians allow you to be a member of G.C.N?.....If so they should show by signing below

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Relationship to member..... Signature.....

Your guardian or parent may be requested to attend some meeting organised by Girl Child Network If they want they should indicate by a (yes).....

Self Declaration

I have read and understood all rules laid down by the Girl Child Network and promise to abide them

Signature..... Date