

AFPREA

African Peace Research and Educational Association (www.afprea.com)



INSTITUTIONAL MEMBERSHIP APPLICATION / RENEWAL FORM

Membership Type: NEW: RENEWAL: → Membership number:

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Name of Director:

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I apply my membership into African Peace Research and Educational Association, I hereby acknowledge by signing this form that the information provided above is true. I hereby email completed and signed application form as signed copy to ndaluwasike2006@yahoo.com or charleswasike@afprea.com

Signature: _____ Date: _____.