Ìgbà-Dún Membership Application Form

Thank you for your interest in joining Ìgbà-Dún. Please complete this form to apply for membership.

Personal Information:	
1. Full Name:	
2. Date of Birth:	
3. Address:	
4. Email:	
5. Phone Number:	
6. Preferred pronouns (optional):	
Background and Interests:	
7. What is your current level of familiarity with Yoruba	language?
[] No knowledge [] Beginner [] Intermediate [] Ac	dvanced [] Native speaker
8. What aspects of Yoruba culture are you most interes	sted in? (Check all that apply)
[] Language [] Music [] Dance [] Art [] Literature []	History [] Food
[] Other (please specify):	
9. Why do you want to join Ìgbà-Dún? (100 words max	·)
10. How did you hear about Ìgbà-Dún?	
11. Do you have any skills or experiences that you believelesse describe briefly.	eve could contribute to the club? If yes,

Commitment:

12. Are you able to commit to regular attendance at club meetings and events?

[] Yes [] No
[] Sometimes (please explain):
13. Would you be interested in volunteering for club activities or committees?
[] Yes [] No [] Maybe
Agreement:
14. I have read and agree to abide by Ìgbà-Dún's Code of Conduct and Values and Principles document.
[] Yes
15. I understand that my application will be reviewed by the club's committee and that membership is subject to their approval.
[] Yes
16. I consent to Ìgbà-Dún storing and processing my personal data for the purposes of club administration and communication. I understand that my data will be handled in accordance with data protection regulations.
[] Yes
Signature:
Date:
For Club Use Only:
Received by:
Date received:
Decision:
Date of decision:

Please return this completed form to: [Insert club email or address]