

Mediterranean Foundation for the survival of African Migrants

Rc168539

MOTTO: TOGETHER WE CAN

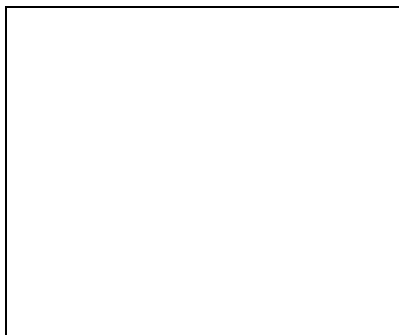
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Full Name:

Address:

.....City/Province.....

Phone:Email.....

Religion:

Nationality:

Place of Residence:

Next of Kin:Relationship:

Area of specialty.....

Tick:- I want to be (a) volunteer (b) Permanent Member

I promise to serve the foundation and humanity to the best of my ability

.....
Signature

.....
Date

