

## KAKAMEGA COUNTY YOUTH FOR CHANGE

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## MEMBERSHIP FORM.

THIS FORM IS FOR FULLY REGISTERD MEMBERS OF THE GROUP. IT MUST FILLED IN BLOCK LETTERS AND DELIVERED TO THE SECRETARY FOR REFERENCE PURPOSES.

1.	FULL NAMES	
2.	ID NUMBER	
3.	PHONE NUMBER	
4.	EMAIL ADDRESS	
5.	REGION REPRESENTED	
6.	DATE OF REGISTRATION	
I agree to be a member of <b>KAKAMEGA COUNTY YOUTH FOR CHANGE</b> group and to abide by the rules as guided by the group's constitution.		
DATE		SIGN
CHAIRN	MAN	SIGN
SECRET	TARY	SIGN
OFFICIA	AL STAMP	