

Membership Application

(Form only to be filled by serious candidates)

A chance to do something for the society. The joy and satisfaction of bringing smiles to others through our organization. Every great achiever is inspired by a great mentor.

Select Membership Category (underline or circle). UMN Membership Fee is non-refundable.

General Member- **Ksh.2, 000 (USD.20)**

Well Wisher- **Ksh.10, 000 (USD.100)**

Honorary Member- **Ksh.50, 000 (USD.500)**

Membership Responsibilities

As a member your responsibilities are:

- To actively participate in meetings and events regularly (at least one per month and/or events per semester)
- To provide clear and timely communication in response to meetings and/or event invitations To volunteer, when available, at community service events.
- To maintain professional conduct by treating fellow members and our guests with respect and courtesy.
- To help maintain a positive, friendly environment necessary for all members to learn and grow.
- To pay annual membership dues on time.
- To be an ambassador for Udhadini Mentorship Network.

Personal Details

Name:

Local Address:

Permanent Address:

Identification Number:

Telephone:


Email:

Nationality:

Profession:

Sex:

DOB:

 (+254) 0729782747 / 0782267237

Educational History

No: Yrs	Education Record	School/College	Board/University

Questions and answers

How did you come to know about Udhamini Mentorship Network?

Why did you choose Udhamini Mentorship Network and what Motivated you?

Are you a Member of any other association? If yes, please give details.

What are your Strength and Weakness?

What will be your contribution to Udhamini Mentorship Network and what are your fields of interest?

What are your hobbies?

Terms, Conditions, and Rules

The person should be above 18 years to be an active member of this organization.

The person should be physically and mentally strong (Special Person Define First) and willing to work for the organization individually or in a group and travel at his/her own expenses.

A person is selected and can be removed by the board of directors without notice or giving reason for misconduct, misbehavior, or indiscipline.

The member is willing to work and obey the chairman and core group.

The member will give his/her best effort to full fill objective and task assigned to him or her.

Member should attend the general meetings and participate fully and have to give written application for being absent,3 days before the meeting or receive a penalty of Ksh.100

The meetings will be held as determined by the board from time to time.

You are only considered a member after subscribing.

Payment Method

Through **M-PESA**, SAFARICOM LIPA NA M-PESA:
Paybill Number (Business Number); **731593**
Account name; **Udhamini Mentorship Network**.
OR

Through **Direct Deposit/Cheque**, Barclays Bank (now Absa Bank)
Account Number for Kenya Shillings:**2040035985**
Account Number for US Dollars: **2040035977**
Name, **Udhamini Mentorship Network**

Declaration

I.....(Your Name),declare that all information furnished inthis form is true to the best of my knowledge and belief. I have read the terms and condition and rules, and I will abide by them and work in the interest of the organization. My membership can be cancelled by the board without assigning any reason if my activities or conduct are deemed unfit for the organization or for any other reason. By signing this document, I agree to be part of this organization and work for it and ready to obey and follow orders task assigned by the board under leadership of chairman and founder members.

DATE:

Signature of applicant:

Signature of Chairman:

Signature of Secretary:

FOR OFFICIAL USE ONLY

Application received on:.....From

Mr./Ms./Mrs./Dr./Prof./.....Subscription received on:.....

Approval dated:.....Receipt No:.....

For Ksh..... (In Words).....towards.....

Through.....Dated:.....Drawn on:.....

