



# MEMBERSHIP APPLICATION FORM

Africa China Culture and Arts Exchange Society (ACCAES)

**Name:**

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**Home Address:**

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**Postcode:**

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**Home Telephone:**

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**Mobile:**

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**Business/Employer Name:**

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**Position Title or Description:**

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**Business Address:**

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**Postcode:**

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**Business Telephone:**

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**Fax:**

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**Email:**

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**Date of Birth:**

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**Partners Name**

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**Children's Names (and their ages if under 18)**

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**Some creative/artistic and personal background details that will enhance your contribution as a member:**

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**I hereby certify that if accepted to Membership of the ACCAES, I will exemplify its objectives in all my daily contacts and will abide by its rules. I agree to pay an admission fee and dues in accordance with the stipulated rules.**

**Signature:**

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**Date:**

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**Review Panel Approval on:**

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