# **Membership Application Form**

(Use extra pages if necessary)

# Name of Organization (and Acronym): ……………………………………………………………

# Name of Director/ Country Director……………………………..…………Sex………..

# DETAILS OF Registration With relevant Ministry, Date & REGISTRATION No: …..……………………………………………………………………………………..............…………………………………………………………..………………………………………………………

# Address In Cambodia: ………………………………………………..……………………………

Telephone Numbers: …………………………………/Fax: ………………….

Email:……………………………….…Website:……………………………..…

|  |  |
| --- | --- |
| Vision |  |
| Mission |  |
| Objective |  |
| Value |  |

Project Implementation:

|  |  |  |  |
| --- | --- | --- | --- |
| Project Title: | Timeframe | Target Area | Target Group |
|  |  |  |  |
|  |  |  |  |

We hereby apply for membership in the Child Rights Coalition Cambodia (CRC-Cambodia) and agree to be bound by its by-laws.

Signature & Seal………………………………Date: ……………………

Name……………………………Director/Chair Person/Country Director

***Attached Files:***

1. Valid Status : ……………………………………………………01
2. Letter of Legal Registration with relevant Ministry (Copied): ...01
3. Last Annual Report : ……………………………………………………01
4. Child Protection Policy : ……………………………………………………01
5. Declaration Letter for Annual Membership Fee:………………….…01