



# YOUNG AVIATOR

## MEMBERSHIP APPLICATION FORM

### SECTION A (PERSONAL DETAILS)

NAME:

DATE OF BIRTH:

GENDER (M/F):

POSTAL ADDRESS:

EMAIL ADDRESS:

ACADEMIC LEVEL (TERTIARY / SECONDARY / PRIMARY):

NAME OF INSTITUTION ATTENDED:

### SECTION B (DECLARATION AND CONSENT)

#### MEMBERSHIP FEES PER ANNUM

EDUCATOR FOR STEM EDUCATION      GHC 100

COLLEGIATE MEMBER                      GHC 100

PRE-COLLEGIATE MEMBER              GHC 100

JUNIOR MEMBER                            GHC 20

I agree to pursue the objectives of the foundation (to be signed by legal guardian if in primary or secondary school)

Sign.....

Date:.....