



Membership Application Form

Please complete this Form in order to become a Member of **Tanzania Public Sector Human Resource Managers Network**

Application date

A: Personal Information

Full Name:

B: Contact Information

Email:

Postal Address:

Mobile/Cell. No

Gender (Tick):

Female Male

Tell. No:

C: Employment Details

Name of your Employer:

Employers Postal Address:

Your Position:

D: Membership Information:

Choose membership type (Tick):

Individual Membership Honorary Membership Corporate Membership

E: Agreement:

By signing this form, I agree to comply with all rules and regulations of this Network. I also grant permission to us my contact Information for member communication purpose. I commit myself to transfer the Membership fee to the following account:

Bank: CRDB

Account No: 0133871998100

Account Name: Tanzania Public Sector Human Resource Managers Network

Signature: _____