

1. Name: (1st) _____ (Last) _____ (Middle) _____
2. Date of Birth _____ Place of Birth: _____ Marital status: _____
3. Address in Ghana: _____
4. District: _____ Region: _____
5. Phone: _____ E-mail: _____
6. Address in Nigeria: _____ Phone: _____
7. Home Town / Village: _____ LGA _____ State: _____
8. Please, list names of other Nigerians below 16 years of age living in your household in Ghana:
 1. _____
 2. _____
 3. _____
 4. _____
8. How many children _____ No. Female: _____ No. Male: _____
9. Date of arrival in Ghana: _____ No. years in Ghana: _____
10. a) Any travel document? ☐ Yes ☐ No If yes type of document _____
 b) Do you wish/intend to process one? Yes ☐ No ☐
11. Resident permit ☐ Yes ☐ No work permit ☐ Yes ☐ No Student permit ☐ Yes ☐ No
 If yes pls. attached photocopy ☐ Yes ☐ No ☐ Full Nigerian ☐ Dual citizen of Nigerian & Ghana ☐ others: _____
12. Purpose of stay in Ghana: _____ Occupation/Business: _____

13. Employee ☐ Self-Employee ☐ Government employment ☐ private employment private business registered with _____ at _____
☐ Not registered/informal business (e. g petty trading)

a) Contact next of kin in Ghana

b) contact next of kin in Nigeria

14. Name: _____

15. Occupation: _____

16. Address: _____

17. Phone: _____

18. District/Region, State/Town: _____

19. *I hereby certify that the information provided in this form is correct and true and I pledge to humbly respect the ANC-GH constitutional provisions, and I will attend the meetings of ANC-GH. I accept the payment of my monthly/ annual dues electronically as may be requires. Attached is my non-refundable membership registration of GH¢100.00*

Note:

- Registration fee covers One (1) ANC- GH Biometric membership ID card and souvenir
- Monthly and Annual dues are deductive
- Remember in good standing is the person who registered and has paid up dues up to date
- Make sure receipts are issued you at the payment of your registration fees

20. Signature: _____

Date: _____

OFFICIAL USE ONLY

APPROVAL REMARKS

Approved as member ☐

No approval ☐

Reasons for approval / Non-approval: _____

President

Date

Secretary

Date