

DRAFT PEOPLE POWER MOVEMENT (PPM) REGISTRATION FORM

FIRST NAME:

LAST NAME:

GENDER:

Male:

Female:

DATE OF BIRTH:

NATIONALITY:

Date

Month

Year

EMAIL ADDRESS:

PERSONAL PHONE NUMBER:

WHATSAPP NUMBER (*For severe privacy concerns people may decide not use their personal phone number*)

LANGUAGE:

JOINING AS AN:

Individual

Organization

NAME OF ORGANIZATION (*if applicable*)

TYPE OF ORGANIZATION (*Tick option*)

Non-Government Organization

Community Based Organization

Civil Society Organization

Social Movement

Political Movement

Media

Private sector

Other (specify) _____

ORGANIZATION'S FOCUS PROGRAMMES/PROGRAM *(Select one or more programs that your organization is working on)*

Good Governance

Advocacy

Human Rights and Democracy

Sustainable Development Goals

Gender Equality and Women's Rights

Anti- Corruption and Transparency

Equality and Social Justice

Climate and Environmental Justice

Other (specify)

MEMBERSHIP DECLARATION:

This assertion applies to affiliated organizations, associated individuals and supporters of the People Power Movement.

By signing this registration form, I have read, understood and accept the Vision, Mission and Values of the People Power Movement for promoting Good Governance and Fighting Corruption.

I have read, understood and prepared to abide by Code of Conduct of the People Power Movement

I is the authorized representative of the organization that I am signing-up

I consent to receive emails and any other related document or messages from the People Power Movement Secretariat

My organization also accept to be listed on the People Power Movement website as a legal member of the Movement

I endorse agreement with all of the above mentioned assertions:

YES

No

Signed by:

Name: _____

Signature: _____

Date: _____