

GA-DANGME MEMBERSHIP APPLICATION

DATE: _____

NAME: _____

SPOUSE: _____

CHIDREN: _____

ADDRESS: _____

TELEPHONE No.: _____

ALTERNATE No.: _____

Email: _____

HERITAGE: GADANGME_____ OTHER_____

I pledge to join the Ga-Dangme Kpee of Greater Houston, to give of my time and service, to pay my yearly dues and to attend bi-monthly meetings.

Signature: _____