

APPLICATION FOR PAFM-NORTH AMERICA MEMBERSHIP CARD

STEP #1: Please complete the Membership Card Order Form.

Call For the Global Pan African Federalist Congress

"I agree"

"I disagree"



First Name:

Last Name:

Your AKA:

Email address:

Phone Number:

Street Mailing Address:

City:

State:

Zip Code:

Skype Address (if applicable):

Zoom Address (if applicable):

Facebook Page ID (if applicable):