



AOG THE ASSOCIATION OF THE OVAHERERO/OVAMBANDERU GENOCIDE IN THE USA

MEMBERSHIP APPLICATION FORM (VALID FOR ONE CALENDAR YEAR)

Instructions for completing application

1. Print or type all entries
2. Your response to all items is appreciated
3. Enclose a check or money order made payable to AOG-U.S.A
4. Mail form and payment to:
AOG-USA
P.O. Box 26
245 N. Main St.
New City, NY 10956

New Membership Renewal Membership

Name _____
(Last) (First) (MI)

City _____ State _____ Zip Code _____

E-mail Address _____

Phone _____

Active Membership: (\$25) Active Membership is restricted to individuals (who support causes consistent with the objectives of the Association) who reside in the USA. Each Active Member is entitled to have voice and one vote, and is eligible to hold elective Association offices

Associate Membership: (\$20) is available to descendants of the Ovaherero/Ovambanderu in the Diaspora and other individuals who reside outside the USA and do not qualify for Active Membership.

Signature _____ Date _____

Please print this form, complete and sign it.