





## MEMBERSHIP FORM

### Campaign of African Cities for the Economic Empowerment of Women

**I, the undersigned, (name):** .....

**Acting in my capacity as (Title / Function):** .....

**Representative (name of city):** .....

**Country:** .....

**Declare that (add name of city):**  
.....

**Voluntarily adheres to and undertakes to participate in the Campaign of African Cities Favouring the Economic Empowerment of Women, initiated by REFELA and to subsequently sign the corresponding Memorandum of Understanding with UCLG Africa.**

**Date:** .....

**Signature:** .....

**Official Stamp:** .....

**(The Membership Form will be stamped with the Official Stamp of the city, town, local authority, or national association of authorities concerned)**

**Contact details:**

**Name of the person to contact:** .....

**Phone:** .....

**E-mail:** .....

**Address of the town hall:** .....