PMS GO Association Membership Application Form

Application for Organizational Membership

Thank you for your interest in joining the PMS GO Association. To ensure that all member organizations are duly authorized and representative of their communities, please complete this application form and provide the required supporting documentation.

Section 1. Organization Information

Organization Name: _____

Country: _____

Year Established: _____

Legal Registration Number (if applicable): _____

Organization Website: _____

Primary Contact Person: _____

Position/Title: _____

Email Address: _____

Phone Number: _____

Section 2. Organizational Profile

Mission and Objectives of the Organization:

Primary Activities and Programs:

Number of Members/Families Represented: _____

Section 3. Legal Status Verification

Please confirm the following:

☐ Our organization is legally constituted and registered in our country of operation.

☐ We have attached official documentation demonstrating our legal status (certificate of registration, incorporation documents, or equivalent legal documentation).

Name of issuing authority: _____

Section 4. Board Approval

Please confirm the following:

☐ Our Board of Directors/Governing Body has formally approved the organization's application for membership in the PMS GO Association.

☐ We have attached documentation confirming this approval (board resolution, meeting minutes, or equivalent document).

Date of Board Approval: _____

Section 5. Designated Representative

The organization hereby appoints the following individual as its official representative to the PMS GO Association:

Representative Name: _____

Position/Title: _____

Email Address: _____

Phone Number: _____

Please confirm:

☐ We have attached a signed Representation Authorization Document approved by our Board of Directors/Governing Body, authorizing the above-named individual to represent our organization within the PMS GO Association.

Section 6. Declaration

On behalf of the organization, I certify that:

- The information provided in this application is accurate and complete.
- The organization is legally constituted in its country of operation.
- The organization's governing body has approved this application.
- The designated representative has been formally authorized to act on behalf of the organization within the PMSGO Association.
- The organization agrees to abide by the PMSGO Association's statutes, policies, and governance requirements.

Name of Authorized Signatory: _____

Position: _____

Signature: _____

Date: _____

Required Supporting Documents Checklist

Please submit the following documents with your application:

☐ Proof of legal registration/incorporation of the organization.

☐ Documentation confirming Board approval of membership in PMSGO Association.

☐ Signed Representation Authorization Document naming the official representative.

☐ Copy of the organization's bylaws, statutes, or governing documents (optional but recommended).

☐ Any additional information relevant to the application.

For PMSGO Association Use Only

Application Received: _____

Reviewed By: _____

Date Reviewed: _____

Decision:

☐ Approved

☐ Additional Information Required

☐ Not Approved

Comments: