



Tanzania Professionals Network (TPN)

P.O. Box 21605 Dar Es Salaam -0782-820820/784-618320/0713-334078/0716898685/0658-482597

APPLICATION FOR MEMBERSHIP FORM

Full Name	Prof./Dr./Eng./Acc./Hon./Mrs./Mr./Ms.
Type of membership applied (Please refer to the Note below)	
Profile -Please briefly indicate your education background and/qualification. Summary of your experience and /current Job/Business/ College /University and Phone Numbers and/e-mail	
Your Objective(s) for becoming a TPN Member	
Membership Fee Paid (TZS)	
Subscription Fee Paid (TZS)	
Donation (TZS)	

Signature _____ **Date** _____

Note:

Types of TPN Membership

- 1) **Students Category** – Includes students in Universities and Colleges
Membership Fee (paid Once) is **TZS 10,000** and Monthly Subscription Fee is **TZS 5,000**
- 2) **Individual category** - Includes individual professionals in office, business, and artisans e.tc. residing in United Republic of Tanzania or in Diaspora -Membership Fee (paid once) is **TZS 50,000**, and Monthly Subscription is **TZS.10,000**
- 3) **Corporate Category** – Includes legally registered associations, organizations and companies
Membership Fee (paid once) is **TZS 100,000** and Monthly Subscription is **TZS 20,000**

Please pay your membership fee up front in full, and you can arrange to pay your annual subscription fee in full or by installments provided it is cleared within the year.

- 4) **We accept your Donation**

THANK YOU