



# RESIDTRATION FORM

## Client's Information

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  Female  Male  NB

Address: \_\_\_\_\_ City: \_\_\_\_\_ Country \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

## Position Applied For and Motivation to join Xornimo & Xaqsoor Party

If there was something you could change or improve about your Party, what would it be?

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## Skills

Please check any of the following that apply to you:

- |                                                   |                                                  |                                            |
|---------------------------------------------------|--------------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Leadership               | <input type="checkbox"/> Organisation            | <input type="checkbox"/> Communication     |
| <input type="checkbox"/> Public Relations         | <input type="checkbox"/> Campaigning             | <input type="checkbox"/> Outreach          |
| <input type="checkbox"/> Fundraising              | <input type="checkbox"/> Financial Management    | <input type="checkbox"/> Technology & IT   |
| <input type="checkbox"/> Research & Data Analysis | <input type="checkbox"/> Languages & Translation | <input type="checkbox"/> Creative & Design |
| <input type="checkbox"/> Legal & Policy Expertise |                                                  |                                            |

## Emergency Contact

Full Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_



## Political Background

Please check any of the following that apply to you:

Currently a member of other political party?

Yes (specify) \_\_\_\_\_

No

Are you currently serving in any political capacity?

Yes (specify) \_\_\_\_\_

No

Have you served in any political capacity in the past?

Yes (specify) \_\_\_\_\_

No

Other please specify: \_\_\_\_\_

## Reference of Good Conduct

Referees	Roles
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

Have you ever been convicted of a criminal offense? or Do you currently have any ongoing criminal cases or investigations?

## Consent and Agreement

Important Notice:

Please ensure that all information provided in this registration form is true, complete, and accurate to the best of your knowledge. Any false, misleading, or incomplete information may lead to the rejection of your application or cancellation of your membership if discovered later.

By submitting this form, Agree to abide by party's constitution & code of conduct?

Client's Signature:

S General's Signature:

Date:

Date:

