

**MEMBERSHIP FORM**

**CAMPAIGN# AFRICAN CITIES WITH ZERO TOLERANCE FOR VIOLENCE AGAINST WOMEN AND GIRLS**

I, the undersigned, (name of the person), acting in my capacity as (title and function)  
.....  
.....  
.....

Representative: (name of city, town, local authority or national association of local authorities)  
.....  
.....

Country: .....

Address of the municipality: .....

Telephone: .....

Email: .....

Declare that (name of the city, town, local authority or national association of authorities)..... voluntarily undertakes to adhere to and participate in the REFELA ‘African Cities Campaign with Zero Tolerance for Violence against Women and Girls’ and will sign the corresponding protocol of agreement with UCLG Africa.

Date.....

Signature.....

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