WOMEN ON BOARDS ZIMBABWE

INSTITUTE OF DIRECTORS ZIMBABWE

Women on Boards Zimbabwe

MEMBER APPLICATION FORM

Please complete this application and return by email: membership@iodz.co.zw

PERSONAL DETAILS

First name(s) _____

Last name_____

Date of birth_____

COMPANY DETAILS

Company _____

Position_____

BUSINESS ADDRESS

Address _____

_____ Post code_____

Phone_____ Mobile_____

Email_____

Position_____

HOME ADDRESS

Address _____

_____ Post code_____

Phone_____ Mobile_____

Email_____

Institute of Directors Zimbabwe
82 Mutare Rd
Msasa,
Harare

Tel: +263 242 885 072 - 80

Email: membership@iodz.co.zw

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QUALIFICATIONS

Highest Qualifications_____

Other Memberships_____

WoBZ MEMBERSHIP CATEGORY (*Tick*)

Complementary Member ☐ Future Women Boards Member (FWoBZ) ☐

Full Member ☐

COMMUNICATION PREFERENCES

Preferred email address _____

Preferred delivery address_____

HOW DID YOU HEAR ABOUT US? _____

IoDZ First Capital Bank account details:

Account name: Institute of Directors Zimbabwe
Branch: NGO / Agribusiness Centre
Account number: 2133-3000709(US$)
Account number: 2133-1000345 (ZWL$)

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