



ANNUAL  
MEMBERSHIP FEE \$ 2000  
(NATIONAL)

**THE JAMAICA ASSOCIATION OF GUIDANCE COUNSELLORS IN EDUCATION**  
**MEMBERSHIP APPLICATION FORM**

I, THE UNDERSIGNED HEREBY APPLY FOR MEMBERSHIP IN THE JAMAICA ASSOCIATION OF GUIDANCE COUNSELLORS IN EDUCATION AND PLEDGE, IF ACCEPTED, TO ABIDE BY, AND OBSERVE THE RULES AND BY-LAWS OF THE ORGANIZATION AT ALL TIMES.

- 1. SURNAME .....
- 2. CHRISTIAN NAME.....
- 3. HOME ADDRESS .....
- ..... TELEPHONE NO. ....
- 4. INSTITUTION EMPLOYED .....
- 5. ADDRESS .....
- ..... REGION .....
- 6. YEAR IN WHICH YOU BECAME A COUNSELLOR .....
- 7. IN WHAT AREA OF THE ORGANIZATION WOULD YOU LIKE TO BE INVOLVED IN THE NEXT TWO YEARS .....
- .....
- .....
- .....
- .....

SIGNATURE OF MEMBER ..... DATE.....