



EASTERN REGIONAL ORGANIZATION FOR PUBLIC ADMINISTRATION
SECRETARIAT GENERAL

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GROUP MEMBERSHIP APPLICATION FORM

I. ORGANIZATIONAL INFORMATION	
Name of Organization	
Country/Location	
Objectives	
History	
Activities	
Publications	

II. CONTACT DETAILS	
Name and Email of Contact Person	
Mailing Address	
Phone Number	
Facsimile Number	
Email Address	
Website	

* Please use additional sheets if necessary.

III. OFFICERS/STAFF		
Name	Position	Term/Years

Date: _____

Authorized Signature: _____

The membership to EROPA is subject to the approval of the EROPA Executive Council. The EROPA Secretariat will contact you regarding the status of your membership. In order to be considered as an active group member of EROPA, a member must pay an annual membership fee of USD 165. For more details, please visit www.eropa.co.

Do you want to join our roster of EROPA Experts and Practitioners (Exp)? Visit www.eropa.co/join-eropa-exp.html for more details.