

City Open University (CoU)

Membership Application Form (Hard Copy)

Brand color: Dark Red #890505 | Website form template (placeholder)

Applicant Information

Full Name: _____

Email: _____

Phone/WhatsApp: _____

Country: _____

Category: _____

Organization (if applicable): _____

Address: _____

Notes / Statement

Submission Instructions

- Complete all required fields and choose a membership category.
- Attach ID/CV where applicable.
- Scan and email to collaboration@cityopenuniversity.org (replace with your official email).

Signature

Applicant Signature: _____ Date: _____

CoU Office Use: _____ Ref: _____