## MEMBER/VOLUNTEER FORM

I volunteer to support the initiatives taken by POPA and would like to lend my support to the following projects of POPA.

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Off.:		
Phone no. {R}:	{O}:	
Mobile:	Fax No.:	
Email:		
Date:	Signature:	

## THE SUPPORTERS HAVE OPPORTUNITY

- To express their views and exhibit their skills and expertise through active involvement in furthering the objectives of "Protection Of Rights Association."
- To avail of guidance and support for fighting injustice.
- To become instrumental in bringing social change.