



# INITIATIVES REGISTRATION FORM

To register your Government/Institution to :-----  
(Initiative name)-----,

The following signifies a voluntary commitment by: -----  
(Government /Organization name)

to support this initiative and become an active participant in any related Project. The Participation is open for nations, governments and governmental agencies, international organizations and institutional donors, non-governmental organizations, companies, startups and other private sector stakeholders who are committed to identifying and implementing relevant projects with specific focus in Africa.

Authorized representative (Name): -----

Signature----- Date -----

## CONTACT INFORMATION

Organization-----

Website-----

Name-----

Title-----

Mailing Address-----

City/State/Zip Country-----

Email-----

Telephone-----

Fax-----



## PROJECT NETWORK MEMBERSHIP RESPONSIBILITIES

- 🌐 Offer subject matter expertise to validate initiatives
- 🌐 Ensure the effective management, achieve strategic objectives and KPIs
- 🌐 Make strategic and financial decisions
- 🌐 Manage organization of local and global panels, conferences, forums
- 🌐 Manage the respective working group operations
- 🌐 Define, prepare, and implement the roadmap
- 🌐 Invest in the different projects
- 🌐 Represent the initiative at global and local events

## TYPE OF ORGANIZATION

(Select the category that closely defines your organization)

- National governments  
Local, regional, and other governmental organization
- Non-governmental organization  
Non-profit organizations
- Researchers organization  
Researchers who have interest in developing technologies and projects
- Financial Institution  
Sources of financing for projects
- Other (please specify)

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## PROPOSE OPPORTUNITIES TO SUPPORT THE INITIATIVE