



Peace for Humanity Foundation (PFHF)

Membership Registration Form

Full Name:	_____
Email Address:	_____
Phone Number:	_____
Date of Birth:	_____
Residential Address:	_____
State of Residence:	_____
Why do you want to join PFHF?	_____
Areas you'd like to volunteer in:	_____

Signature: _____

Date: _____