

PACE EXPRESSIONS

(Professionals in Children Events and Entertainment Services)

Personal Data Form

Picture of the member

Name (Surname first):	Sex:
Date of birth: Age: Highest level of edu	cation:
Nationality: State:	City/Town
Residential Address:	_1//
Hobbies: Addition	nal Skills:
Family Information	
Name of Parents/Guardian:	
Phone Number: E-ma	it:
Relationship with child/ward:	
Residential Address:	
Office Address:	
Nationality:State:	City/Town
Additional Information (if any):	
Declaration (If child/ward is below 18 years)	
I, Mr./Mrs.	hereby certify that the above information is correct and
	(Na <mark>me o</mark> f child/ward) has my permission to participate
in the activities of PACE Expressions.	
Date:Signature:	
For Official Use Only	
Form fee paid: (3,500 Naira: 3,271 Naira fee, 229 Naira VAT (7%)) Cash payment: Bank transfer payment:	
Participation Approved/Disapproved: Area of Participation:	
Remarks:	Date: Signature:

© PACE Expressions Limited, Eze's Estate, # 10 Ollorte Road, Behind Deeperlife Bible Church, Alesa, Nchia Eleme, Rivers State, Nigeria, Tel: +234 (0)80 39495128 or +234 (0)80 25886923, RC Number: 1598857, Tax Identification Number: 21471777-0001

Bank Account Information: Zenith Bank PLC, Nigeria, BIC/SWIFT-Number: ZEIBNGLAXXX Account Number: 1016 6076 36

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