MEMBERSHIP & ADMISSION APPLICATION FORM

ONDO PROGRESSIVE INDIGENES IN DIASPORA (OPID)

Unity • Heritage • Development • Progress

Please complete all applicable sections. Submission of this form does not constitute automatic admission. Applications are subject to screening by the Membership and Admission Committee and approval in accordance with the OPID Constitution and Bylaws.

SECTION A - PERSONAL INFORMATION

Surname / Family Name	**First Name**	**Middle Name**
Date of Birth (DD/MM/YYYY)	**Age at Application**	**Country of Residence**
City / State / Province	**Nationality**	**Telephone / WhatsApp**
Email Address		

SECTION B - ELIGIBILITY & ONDO KINGDOM CONNECTION

☐ Native son of Ondo Kingdom

☐ Descendant of an Ondo Kingdom indigene

☐ Able to establish ancestral ties to Ondo Kingdom

Ondo Family / Lineage / Quarter / Community (as applicable)

Briefly describe your Ondo Kingdom ancestry or family connection

SECTION C - PROFESSIONAL & COMMUNITY PROFILE

Occupation / Profession	**Employer / Business / Organization**
_____	_____

Professional Skills / Expertise

_____

Community, cultural, professional or volunteer affiliations (optional)

_____

_____

SECTION D - MEMBERSHIP MOTIVATION & CONTRIBUTION

Why do you wish to join OPID?

_____

_____

_____

_____

How would you like to contribute to OPID and the development of Ondo Kingdom?

_____

_____

_____

_____

Areas of Interest (select all that apply)

☐ Education
☐ Youth Development
☐ Community Development
☐ Welfare
☐ Projects & Partnerships
☐ Healthcare
☐ Culture & Heritage
☐ Investment & Entrepreneurship
☐ Technology & Innovation
☐ Other

SECTION E - RECOMMENDATION BY FIVE MEMBERS IN GOOD STANDING

Applicants for Full Membership must be recommended by at least five OPID members in good standing. Recommenders may be contacted by the Membership and Admission Committee to verify their recommendation.

#	Full Name	Email / Phone	Confirmation / Initials
1			
2			
3			
4			
5			

SECTION F - FEES, OBLIGATIONS & DECLARATIONS

Admission Fee: ₦500,000, non-refundable. Annual Dues: ₦500,000, payable during the first quarter of each calendar year. Where a member experiences financial hardship, approved flexibility may allow payment in no more than two installments within the applicable due period. Late-payment penalties remain governed by the Bylaws.

☐ I am ordinarily between 40 and 60 years of age at the time of application.

☐ I currently reside outside Nigeria.

☐ I understand that the ₦500,000 admission fee is non-refundable.

☐ I understand that annual dues are ₦500,000 and are payable as prescribed by the Bylaws.

☐ I agree to uphold the OPID Constitution, Bylaws, policies, decisions and lawful regulations.

☐ I understand that submission or payment does not guarantee admission.

☐ I certify that the information supplied is true and complete.

☐ I consent to legitimate use of my information for OPID membership administration, screening, governance, communications and welfare purposes, subject to applicable law.

Applicant Full Name	**Date**	**Electronic Signature (type full name)**
_____	_____	_____

SECTION G - APPLICATION CHECKLIST

☐ Completed application form

☐ Five member recommendations provided

☐ Proof of Ondo Kingdom ancestry/connection, if requested

☐ Supporting identification/documentation, if requested

☐ Admission fee payment evidence, when requested/required

SECTION H - FOR OFFICIAL OPID USE ONLY

Application Reference No.	Date Received	Received By
_____	_____	_____

Screening Outcome

☐ Recommended ☐ Further Information Required ☐ Not Recommended

Committee Comments / Screening Notes
_____
_____
_____
_____
_____

Membership & Admission Committee Chair / Authorized Officer	Date
_____	_____

GENERAL ASSEMBLY / MEMBERSHIP APPROVAL

☐ Approved ☐ Deferred ☐ Not Approved

Date of Decision	Meeting / Resolution Reference	Membership Effective Date
_____	_____	_____

Assigned Membership No.	Recorded By	Date
_____	_____	_____

Confidentiality Notice: This form contains personal information intended for legitimate OPID membership administration. Access should be limited to authorized officers and committees and handled in accordance with applicable privacy and data-protection requirements.