



Rural Affairs Institute for Development

Benin City

052-293 777

www.ruralaffairsinstitute.org

Facilitator Registration Form

1. Name:
2. Gender:.....
3. Date of Birth:.....
4. Telephone/Whatsapp No.:.....
5. Email:.....
6. Address:.....
.....
7. LGA:.....
8. State:.....
9. Country:.....
10. Discipline & Qualification:.....
.....

Note: Prospective Facilitator must be willing to enrol in any of the Institute Professional to qualify.

Signature

Date

Official Use