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| MEMBERSHIP APPLICATION FORM |

In making this membership application, I do hereby agree to conform to the society‘s Bye-laws and any amendments thereof.

**PERSONAL DETAILS**

|  |  |
| --- | --- |
| Surname: | First Names: |
| Date of birth: | Gender: Male ☐ Female ☐  |
| Home Village: |
| Identity Card No. |
| Are you a member of another SACCOS? YES NO |
| Physical Address: |
| Postal Address: |
| Contact numbers: | Home: | Cellphone:  | e-mail: |
| Civil Status: Single ☐ Married ☐ Divorced ☐ Widowed☐  |

**EMPLOYMENT DETAILS**

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| --- |
| Government Ministry/Parastatal:  |
| Department: |
| Designation: |

**NOMINEES (**Person(s) designated to receive funds/benefits in the unfortunate event of loss of life)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **NO:** | **NAME** | **RELATION** | **DATE OF BIRTH** | **ID (OMANG)** | **CONTACT NO.** |  **%**  |
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|  |  |  |  |  |  |  |
| **Applicant’s signature: Date:** |

**AUTHORITY TO MAKE DEDUCTIONS**

**Monthly Savings.**

I………………………………………………….. authorize you to deduct……………….(minimum P100.00) from my monthly salary or direct from my bank account held Bank………………………………………………Account Number…………………………………………………..Branch………………………………………on the ……………of every month towards my savings. Salary payment group 1 or 2 (Tick).

**Payment of Shares.**

Contributions to be paid through (Tick Appropriate)

Salary Deductions ☐ Bank Deposit ☐ Cash ☐

Indicate the amount to be contributed below in figures and in words

Amount in figures: BWP…………………………………..

Amount in words:…………………………………………………………………………………………..

No. of installments:………………………………………………………………………………

**Note:** *A once-off joining fee of* ***P200.00*** *will be deducted upon approval of your membership application.*

**RECRUITER/REFERRAL DETAILS**:

Where did you hear about BABEREKI SACCOS:

Website : Social Media: Recruiter:

If Social media,list source.

Recruited by:……………………………………….

Signature of recruiter:…………………………….

Contact details of recruiter: ……………………..

Date:………………………………….

**Signature of Applicant……………………………………Date………….………..…………………………….………...**