

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 <input type="checkbox"/> Female <input type="checkbox"/>	
Home Village:			
Identity Card No.			
Are you a member of another SACCOS?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Physical Address:			
Postal Address:			
Contact numbers:	Home:	Cellphone:	e-mail:
Civil Status:    Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/>			

**EMPLOYMENT DETAILS**

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.	%
<b>Applicant's signature:</b>			<b>Date:</b>			

**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:.....

**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**.....