

Utafiti Savings and Credit Cooperative Society Ltd



P O Box 30709-00100, Nairobi, Kenya • Tel: +254 20 422 3228 • Email: utafiti@cgiar.org

APPLICATION FOR MEMBERSHIP {BY-LAW NO. 12} **(Strictly Confidential)**

New member **Rejoining Member**

I hereby make application for Membership in your Society and agree to abide by the By-laws and/or any Amendments thereof, in the Utafiti Savings and Credit Co-operative Society Limited.

My Particulars are:

Name ID NO.....

(Block Letters)

KRA pin NO. Date of Birth

Home Address

Tel. email.....

Occupation

Employed

Employers Name..... Address

Self-employed.

i) State nature of business.....

ii) Location.....

iii) Monthly turnover.....

iv) Referee (well known to you)

Next of Kin

Name.....

His/Her Address Mobile No.....

His/Her Relationship

Applicant's Signature Date.....

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Signature Witnessed by (Name)..... (Signature).....

Have you been a member of another Sacco? Yes/No

If yes, name of the Sacco and contacts

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How did you get to know about Utafiti Sacco? Referral from:

Employer Employers Name:Contact.....

Member Members Name:Contact.....

Others please state

Mode of Payment

State your preferred mode of payment

Standing order Direct debit M-pesa Check off

(FOR OFFICIAL USE ONLY)

Shs. 1000/= Entrance Fee Paid on Receipt No.

“Voluntary Assignment” signed on

Date of Admission to Membership

Approved by Management Committee vide Minute No.

Allocated Membership Number

.....

Signature

SECRETARY

CHAIRMAN