

HEART SAVINGS AND CREDIT COOPERATIVE SOCIETY P. O BOX 70000 - 00400 NAIROBI | TEL: 020 – 2390954, 0102 510592 EMAIL: heartsacco@gmail.com, info@heartsacco.co.ke

# MEMBERSHIP APPLICATION FORM

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I hereby apply for membership c	of Heart Savings and C	redit Society	Limited and		
agree toabide by: Laws, polices,	rules and any amendr	ments thereof	as may be		
decided from time to time.					
Attach the following: copy of ID, KRA PIN, and One coloured passport size photo					issport size
[Official use only] Member 1	No:(Allocated)	Date	(Registration date)	-	photo
PERSONAL DETAILS					
Name:	Date of B	irth:	ID. No		
PIN. No Set	x	Mari	tal Status		
Home Address	Mobile No	Pł	nysical Location		
Email Address					
EMPLOYMENT DETAILS					
Employer Name	Payroll No		Department		
Employment Terms	Mobile:	Ema	ail Address		
Designation:	Duty station:				
SELF EMPLOYED					
Business Name:	Bus	iness Type			
Physical Location	Phone number		Email		
BANK DETAILS					
Bank Name:	Branch:		A/c. No:		
NEXT OF KIN (WARITHI)					
I authorize the undersigned, upo less any debts to the society. I un subsequent member update form	derstand that I may a				
NAME	RELATIONSHIP	D. O. B	Mobile No.	% assigned	ID/No.
3.					
ł					
			Total	100%	Should add up to 10

## If the next of kin is a minor the following is the Trustee

NAME	RELATIONSHIP	D. O. B	Mobile No.	ID/No.

### MONTHLY CONTRIBUTION

I authorize my employer to deduct from my monthly pay Kshs.....as Heart Sacco Society Limited Shares/Deposits contribution with effect from (Month)..... and Registration fee of Kshs...... to be deducted with the 1st deduction from payroll OR any other mode of Remittance arrangement with the society.

#### MEMBERSHIP TERMS

An applicant shall be registered and shall qualify for rights once the following are met:

- I. A registration fee of Kshs. 1,000/=
- II. At least minimum shares capital. The society shares capital are non-refundable
- III. Minimum monthly contribution.
- IV. The Board has a right to refuse admission of a member after assigning reasons for their decision.
- V. Must be at least 18 years of age and of good standing and character
- VI. A member may at any time withdraw from the society by giving a written notice of sixty (60) working days.

(Refer to member policy for more details)

I confirm that I have read, understood and complied with all the membership terms and conditions as

contained in the by-laws and the particulars I have given are true to the best ofmy belief.

\* Note \* the signature below will be used by the Sacco for all transaction in my Account

APPLICANTS SIGNATURE

(INSIDE THE BOX)

Date: .....

REFERRED BY: .....

#### FOR OFFICIAL USE ONLY

Registration Done by:	Sign:	Date
0 ,	5	
Approved/Not Approved by Sacco Manager:		Sign: