



ACK IMANI TALENT SACCOS

HEAD OFFICE: ACK Diocese of Nakuru

Opposite the Central Police Station

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AFFIX
PASSPORT
PHOTO
HERE

MEMBERSHIP APPLICATION FORM

I hereby make an application for the membership and agree to conform to the ACK Imani Talent Sacco by-Laws and any amendment passed through Annual Delegate Meeting.

SECTION 1: APPLICANT'S PERSONAL INFORMATION

TYPE OF MEMBER: Anglican Faithful Recommended Member Branch: _____

FULL NAME: Mr./Mrs./Miss/Dr./Rev./Canon/: _____

DATE OF BIRTH: ____/____/____ GENDER: MALE FEMALE ID/PASSPORT NO: _____

MOBILE NO: _____ POSTAL ADDRESS: _____ CODE: _____ TOWN: _____

MARITAL STATUS : SINGLE MARRIED

KRA PIN: _____ EMAIL ADDRESS: _____

SECTION 2: EMPLOYMENT DETAILS

Employed Self Employed Others (Specify) _____

EMPLOYER'S NAME: _____ POSTAL ADDRESS: _____

POSITION IN EMPLOYMENT: _____ TERMS OF EMPLOYMENT: _____

SECTION 3: BUSINESS DETAILS (To be completed if not in employment)

BUSINESS NAME: _____

NATURE OF BUSINESS: _____ PHYSICAL LOCATION: _____

POSTAL ADDRESS: _____ POSTAL CODE: _____

SECTION 4: NOMINEE(S) DETAILS

I, the undersigned in the event of my death whilst a member of the Society hereby instructs the Society to pay all amounts due to me, less any debts to the Society to the person named in this section. (The name of nominees' can be given in a sealed letter). I understand that I may alter the name of the Nominated next of kin by filling a subsequent Nominated Next of Kin Forms

REQUIREMENTS

PASSPORT SIZE PHOTO

COPY OF NATIONAL ID/PASSPORT/MILITARY ID

COPY OF KRA PIN CERTIFICATE. BIRTH CERTIFICATE (CHILDREN MEMBERSHIP)

NAME	Relationship to member	Allocation in %	ID/Passport /Birth Certificate No.	Mobile No.

SECTION 5: REFEREES DETAILS (Must be society's member)

I, _____ Membership No. _____ do hereby introduce Mr./Mrs./Ms./ Dr. /Miss _____ ID/Passport No. _____ who is my husband/Wife/Son/Daughter/Friend/Neighbor to join the membership of ACK Imani Talent Sacco Society Ltd.

Signature: _____ Date: _____

SECTION 6: AUTHORITY FOR DEDUCTION OR CASH

Registration fee Ksh 500 shall be payable upon registration. Mandatory share Capital is **60 shares valued at KES50 (KES. 3000)**

Minimum monthly savings contributions is Ksh.500. I commit Ksh _____ as my monthly savings contribution.

SECTION 7: DECLARATION

I declare all the information given herein is true and I shall abide by all the terms and conditions laid down by the Sacco. (Note: Giving false information is an offence under the laws of Kenya)

APPLICANT'S SIGNATURE: DATE _____

FOR OFFICIAL USE ONLY

We have checked and confirmed that all the information given above is correct:

MEMBERSHIP NUMBER: _____

SALES PERSON: _____ SALES CODE _____

REGISTERED BY: _____ SIGNATURE & DATE _____

VERIFIED BY: _____ SIGNATURE & DATE: _____

APPROVED BY: _____ SIGNATURE & DATE _____