# NKWAZI COOPERATIVE SAVINGS & CREDIT SOCIETY LTD

Email: <a href="mailto:nkwazicoop@zamnet.com">nkwazicoop.com</a> I P.O.BOX 50547, LUSAKA I Telephone: 260-211-252318 /22

### **APPLICATION FOR MEMBERSHIP**

#### A. <u>PERSONAL INFORMATION:</u>

🗆 Male	Female	Passport Photo:	Passport Photo:
		Next of Kin	
		Address:	
		Current Employer:	
		Duty Location:	
		Job Title:	
		Staff No.:	
		Current Net pay:	
		Terms of	Permanent     Contract
		Employment:	If Yes, years remaining
	□ Male	Male Female	Male       Female         Next of Kin         Address:         Current Employer:         Duty Location:         Job Title:         Staff No.:         Current Net pay:         Terms of

#### **B.SHARE APPLICATION**

I		hereby apply for
membership in the Nkwazi (	Cooperative Savings and Credit	Society. I attach herewith the membership fee
or authorize the Co-operati	ve to deduct the fee from my fir	st contribution.
Entrance fee is K200.00 (Tv	vo Hundred Kwacha).	
I subscribe for	_ shares valued at K	at K 5.00 (Five Kwacha per share.

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#### C. DECLARATION

I hereby declare that the above particulars are true to the best of my knowledge and belief. I agree to abide by the by-laws of the society, the loan policy, any directions by Board and its Committees. I understand that all my contributions will be made via payroll deduction and I hereby authorize the necessary deductions per pay period or month from my salary as per allotment form attached.

SIGNATURE:	DATE:
Witness: (Member of Nkwazi)	
NAME:	
SIGNATURE:	DATE:

### D. FOR OFFICIAL USE ONLY

Membership No:	
<u>Total Shareholding</u>	
Previous No. of Shares	Value K
Number of shares on this application	Value K
New Total	Value K
Board Minute No:	Date:
Secretary's Signature:	Chairman's Signature:

Applicants Checklist:
Attach the following:
□ Pass photo □ Current Pay slip/Stab □ Allotment Form □ Copy NRC / Passport