



MEMBERSHIP APPLICATION FORM

Dear Sir/Madam

I hereby apply for membership in your Society. I irrevocably consent to adhere to the current Society Bye-laws and Policies including any future revisions.

Member of any Cooperative

Yes ☐ No ☐

If yes, please write Name of the Cooperative _____

APPLICANTS DETAILS

Initials: Mr. / Ms. / Mrs. / Dr. _____ Gender: _____

First Name: _____ Surname: _____

Omang No: _____ DOB: _____

Marital Status: Single ☐ Married ☐ Divorced ☐ Widowed ☐

Postal Address: _____ Physical Address: _____

Tel: _____ Cell: _____ Email: _____

Home Village: _____ Ward: _____

Name of Chief/Headman: _____ District: _____

Next of Kin Details (in case of emergency)

Name: _____ Relationship: _____

Tel: _____ Cell: _____ Email: _____

Employment Details

Designation: _____ Workplace: _____

Employer: _____ Department: _____ Tel (W): _____

NOMINE DETAILS

NO	NAME	DOB	RELATIONSHIP	ADDRESS	ID NO.	CELL NO.
1						
2						
3						
4						
5						

DECLARATION

I _____ of identity number _____
do confirm that the above information is accurate to the best of my knowledge.

Applicant Signature: _____ Date: _____

ATTACHMENTS

1. PLEASE ATTACH THE FOLLOWING TO THIS APPLICATION:

- A COPY OF CERTIFIED OMANG
- POLICE CLEARANCE FORM
- PROOF OF PAYMENT OF JOINING FEE

2. **METHODS OF PAYMENT**

- Deposit P1000 and attach the deposit slip to the application form
- Cash payment of P1000 at the office

BANKING DETAILS

NAME OF BANK	First National Bank (FNB)
ACCOUNT NAME	Mmadinare Multipurpose cooperative Society Limited
BRANCH NAME	Selebi Phikwe
BRANCH CODE	285067
ACCOUNT NUMBER	62872487577