



GREEN TOURISM SACCO

P.O. Box 254796816498-80200 Malindi, PHONE: +254 769 876 131
EMAIL:sacco@itcfoundation.org WEBSITE: gtsacco.itcfoundation.org
Location: Malindi-Kakuyuni Off Malindi -Tsavo Road

MEMBERSHIP APPLICATION FORM

DATE ISSUED:

MEMBERSHIP NO:

A. APPLICATION FOR MEMBERSHIP

I hereby make an application for membership and agree to conform to the Societies BY- LAWS and any other Society's regulations.

FULL NAME MR/MRS./MISS/.....
ID/NO.....MOBILE NO. DATE OF BIRTH.....
GENDER.....MARITAL STATUS..... OCCUPATION.....
EMAIL ADDRESS.....HOME ADDRESS.....
COUNTY OF RESIDENCE.....SUB-COUNTY.....KRA PIN.....
EMPLOYER..... PAYROLL/STAFF NO..... WORK STATION
TERMS OF SERVICE..... WORK STATION ADDRESS
PREFERRED BRANCH.....ARE YOU LIVING WITH ANY FORM OF DISABILITY(YES/NO).....
KRA TAX EXEMPTION CERTIFICATE NO (ATTACH COPY).....EXPIRY DATE.....

B. MONTHLY DEDUCTIONS

I, the undersigned authorize you to deduct **Ksh..... (in words).....**
Only from my Salary/Account each month until further notice and deductions forwarded to GREEN TOURISM SACCO.

C. MOBILE Green Tourism SACCO APPLICATION

I wish to register for MOBILE Green Tourism SACCO, Mobile Phone No;..... * (**Safaricom Number ONLY**)

(**Terms and conditions apply**)

D. NOMINATED NEXT OF KIN

I the undersigned, in the event of my death whilst a member of the society, hereby instruct the society to pay all amounts due to me less any debts to the society to the person named in this section. I, understand that I may alter the name of the nominated next of kin by filling in a next of kin/member information update form.

NAME	RELATIONSHIP	ID NO	ADDRESS	MOBILE NO

E. GENERAL TERMS AND CONDITIONS

- The form should be fully completed.
- Must pay the prescribed entrance fee (**Kshs. 500**)
- Must agree to contribute to the society share capital as stipulated in the society by law (**Kshs. 10,000**)
- Must agree to contribute monthly towards risk fund account (**Kshs. 200**)
- Must attach a copy of the current pay slip (**Where applicable**)
- Must attach a copy of the identity card.
- Minimum share contribution per month is **Kshs. 2,000** for employed members, **Kshs 1,500** for Business members, **Ksh 500** for retired members and **Ksh 1,000** for other members.

F. DECLARATION

I hereby confirm that the information provided herein and the disclosures made are true. I have understood the general terms and conditions of the society and I undertake to comply, observe and be bound by the same.

SIGNATURE OF APPLICANT: **DATE:**

G. OFFICIAL USE ONLY

DECLARATION:

I/we hereby confirm that the above details have been completed in accordance with GREEN TOURISM SACCO procedures. I have checked that the relevant documents have been attached.



RECEIVED BY:SIGN: DATE:

OPENED BY:SIGN:DATE:

VERIFIED BY:SIGN.....DATE.....

H. DATA ENTRY

DATA ENTRY BY:SIGN.....DATE.....

EFFECTIVE MONTH: