



MZIMA SPRINGS SACCO
— Your Personal Anchor —

Passport size photo



FORM NO. 2: MZIMA STUDENT MEMBERSHIP APPLICATION

(Please print in CAPITAL LETTERS with ink.)

A. PERSONAL DATA

- Names: _____
(Surname) (First name) (Middle name)
- Date of Birth : ____/____/____ ID Number: _____ *(number in figures)*
(Dd/mm/yy)
- Mobile phone no: _____ Alternative Phone Number: _____
- E-Mail Address: _____
- Name of Bank _____ Branch: _____
- Account Name: _____ Account No. _____
- KRA PIN NO.-----

- *Name of the Course/Program*.....
- *Name School/Faculty*
- *Registration No*..... *Current year of Study*.....
- *Year of Admission*----- *Expected year of Completion*-----
- *Physical Address*-----

B. **I** _____ wish to save ksh _____ every month starting

_____ (date) after paying a nonrefundable joining fees of Ksh 1000.

C. NOMINATION OF BENEFICIARY

I, as a member of the co-operative, do hereby appoint the following listed nominee(s) to be the only legal beneficiaries of the net of my shares over all loans owing or my total shares in case of my sudden demise subject to the validity of my membership as at the time of death. The beneficiaries are in order of preference.

1. Beneficiary's full names: _____
(Surname) (First name) (Middleman)

Beneficiary's ID Number: _____ Relationship to member: _____
Telephone No.....

2. Beneficiary's full name: _____
(Surname) (First name) (Middle name)

Beneficiary's ID Number: _____ *(number in figures)*

Beneficiary's relationship to member: _____ Telephone no.....

