



BUNISTA SAVINGS & CREDIT CO-OPERATIVE SOCIETY LTD

P.O BOX 194-40601
BONDO

Your Ref: _____ Our Ref: _____ Date: _____

APPLICATION FORM FOR MEMBERSHIP BUNISTA SACCO SOCIETY LTD

SPOUSES

- a. I hereby make application for the membership of the Bunista Sacco Society Ltd and
- b. Undertake to abide by the By-Laws and Resolutions of the Committee of the Society and the General Meeting.

I. PERSONAL DETAILS.

1. Full Name _____
2. I/D / Passport No _____
3. Date of Birth _____ / _____ / _____
4. Nationality _____ County _____
District _____ Location _____ Sub-location _____
5. Employer and address _____
Present station _____ Dept. /Station _____
6. Employment No _____ Occupation _____
7. Mobile Phone No _____ Email _____
8. Terms of Service (Temporary, Contract, Permanent or others) _____
9. If under contract state the expiry date _____ and whether it is renewable _____
10. Bank _____ Branch _____ Account No _____
11. Mode of remittance: check-off system _____, Bank (standing order) _____
Cash _____ (****(Tick appropriate method)****)
12. Home Address _____ Code _____ Town _____

Signature of applicant _____ Date _____ / _____ / _____

II. SPOUSE DETAILS (JOOUST EMPLOYEE)

1. Full Name _____
2. M/No _____ P/F NO _____
3. I/D / Passport No. _____
4. Date of Birth _____ / _____ / _____
5. Nationality _____
6. County _____ District _____
Location _____ Sub – location _____

7. Department _____ Designation _____
8. Mobile Phone No _____ Email _____
9. Terms of Service _____
10. Home Address _____ Code _____ Town _____

Signature of spouse _____ Date _____ / _____ / _____

TO: JARAMOJI OGINGA ODINGA UNIVERSITY OF SCIENCE & TECHNOLOGY

AUTHORITY TO MAKE DEDUCTIONS FROM EMPLOYEES SALARY TOWARDS BUNISTA SACCO SOCIETY LTD.

I _____ hereby authorize you to deduct Kshs. _____ from my monthly salary and pay Bunista Sacco Society Ltd with effect from the month of _____ 20 _____ until further notice.

Please deduct **Kshs. 1,000.00** entrance fee along with the monthly contribution.

Yes _____
 No. _____

P/F No. _____

Department _____

Address _____ Code _____ Town _____

Member's Signature _____ Date _____ / _____ / _____

This is to be used for deduction of shares from my salary.

NOTE

Please quote your bank as it appears on your pay slip and your account number.

Bank Name _____ Branch _____

Bank Account Number _____

FOR OFFICIAL USE

1. DATE OF ADMISSION _____
2. APPROVED ON _____
3. MEMBERSHIP FEE PAID _____
4. MEMBERSHIP REGISTRATION NO. _____
5. APPROVED BY MANAGEMENT MINUTE NO. _____
6. MEMBERSHIP NO. _____