



KENTOURS SACCO SOCIETY LTD

1st Floor Commodore Office Suites, Kindaruma Road, Kilimani, Nairobi
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E-mail: info@kentours.co.ke

SPECIAL MEMBERSHIP APPLICATION FORM *(Applicable to bona-fide children of a principal member)*

I, the undersigned wish to apply for membership in Kentours Savings and Credit Co-operative Society Limited. I do hereby agree to remit my contribution through the bank or any other acceptable mode of payment Kshs...
..... towards my shares/deposit contribution every month unless otherwise stating in writing
by myself and forward the same to the above-mentioned Society with effect from:
Month.....20.....

I agree to pay for:

- i. Entrance Fee of **Kshs 1,000/-**
- ii. Share Capital worth **Kshs 9,000/-** being the minimum share capital of 450 shares of Kshs 20 each
(payment spread over 25 months)
- iii. Bylaw booklet **Kshs 200/-**
- iv. Any other fee that may be applicable at the time of joining the Sacco.

1. APPLICANT DETAILS

- i. Full Names: ID/PP No.:
- ii. Date of Birth: Gender.....
- iii. Email Address: Cellphone:
- iv. Occupation: Marital Status.....
- v. Home Address: P.O. BoxPostal Code.....Town
- vi. District..... Location.....
- vii. Signature..... Date:

2. PRINCIPAL MEMBER DETAILS

- i. Full Names: ID/PP No:.....
- ii. Email Address: Cellphone:
- iii. Employer Company:Relationship to Applicant
- iv. Signature..... Date

3. APPLICANT'S NOMINATED NEXT OF KIN DETAILS

In the event of my death while a member of the society I hereby instruct the society to pay all amounts due to me, less any debts to the society to the person (s) named in the Nominee Card.

Nominee Card **MUST** be attached to this form.

4. FOR OFFICIAL USE ONLY

Date Received: Approved by:
Date: Signature.....

(Attach two passport photos and photocopy of your ID and Birth Certificate)