

THE MARACHI FOUNDATION (TMF) SACCO SOCIETY LTD

Embracing Culture of Saving.

PO.BOX 53-50405 BUTULA 0722250160

AFFIX
PASSPORT
PHOTO

INDIVIDUAL MEMBER ENROLMENT FORM I, Dr/Mr/Mrs/Miss. Apply to be considered for enrolment in TMF SACCO with effect from and attached herewith find my particulars. A: PERSONAL PARTICULARS:	
ID No:	DATE OF BIRTH:GENDER:
	POSTAL ADDRESS:
	MOBILE NO:
AREA CHIEF (HOME AREA):	
B: EMPLOYMENT DETAIL	LS:
EMPLOYER/ORGANIZATION:	
PERSONAL NO:	
DATE OF APPOINTMENT:	
EMPLOYER EMAIL ADDRESS:	
TERMS OF EMPLOYMENT:	Permanent &Pensionable Temporary/ Contract
C: BUSINESS DETAILS (f	or private members)
BUSINESS NAME:	NATURE OF BUSINESS:
PHYSICAL ADDRESS:	MOBILE NO:
SOURCE OF INCOME: Salary	Commissions Professional Fees Self Employment
Have you been a member of TMF Sa	acco before?If yes, give date/year of withdrawal
Have you been a member of another	Sacco? If yes, give name of Sacco
Date of withdrawal	
D: NEXT OF KIN (To be co	ontacted in case the member cannot be reached)
FULL NAME:	
RELATIONSHIP:	ADDRESS:
EMAIL ADDRESS:	MOBILE NO:
RECRUITED BY NAME	ID/NO BRANCH

E: MEMBERSHIP INFORMATION Membership Category: Individual Group Group Name: Group No: Group No: Preferred Contribution Method: Self Deposit Monthly Deductions Monthly Contribution Amount Kshs: **MOBILE BANKING APPLICATION** (Tick as appropriate) Please register mobile banking: YES NO Preferred Mobile Number..... TERMS AND CONDITIONS OF USE OF MOBILE BANKING SERVICES Account Ownership/Accurate Information. You represent that you are the legal owner of the Accounts and other financial information which may be accessed via Mobile Banking. You for the purpose of using Mobile Banking agree not to misrepresent your identity or your account information. You agree to keep your account information up to date and accurate. You represent that you are an authorized user of the Device you will use to access Mobile Banking. User Security. You agree to take every precaution to ensure the safety, security and integrity of your account and transactions when using Mobile Banking. You agree not to leave your Device unattended while logged into Mobile Banking and to log off immediately at the completion of each access by you. You agree not to provide your username, password or other access information to any unauthorized person. If you permit other persons to use your Device, login information, or other means to access Mobile Banking, you are responsible for any transactions they authorize and we will not be liable for any damages resulting to you. You agree not to use any personally identifiable information when creating shortcuts to your Account. We make no representation that any content or use of Mobile Banking is available for use in locations outside of Kenya. Accessing Mobile Banking from locations outside of Kenya is at your own risk. I confirm that the information provided is true. I agree to abide by the By-Laws and any other rules and regulations applicable. SIGNATURE..... **Document Checklist** Filled Membership Application Form PERSONAL NO..... Copy of National ID Card Copy of Current Pay-slip ID NO..... 2 Passport Size Photographs DATE..... Filled Nominee Form FOR OFFICIAL USE ONLY Name Date Signature Data captured by: Received by: Approved by: