



FORM 001A

MEMBER NO:

Grid for member number

MEMBERSHIP APPLICATION/ ACCOUNT OPENING FORM

I hereby make an application for membership in the society and agree to conform to the By-Laws and any amendment thereof, and I will pay Ksh. 500 as a membership enrolment fee and a monthly contribution of Ksh. 200 as a risk fund.

New Membership [ ] Reinstatement [ ] KBBF [ ]

TICK BELOW THE ACCOUNT YOU WISH TO OPEN

Ordinary Current Account [ ] Wezesha Salary Account [ ]

PERSONAL DETAILS

Full Name (Mr/Mrs/Miss etc.)
ID (National ID/Passport/Alien ID/Military ID) No.
Citizenship
Mobile No (1.)
Mobile No (2.)
Date of birth (dd/mm/yyyy)
Gender
E-mail address
Home/permanent address
County
Electoral area
KRA PIN

EMPLOYMENT DETAILS

Employer
Employers address
Designation
Work Station
Gross Monthly Income
TSC/PF. NO

MODE OF SHARES CONTRIBUTION/REMITTANCE

Check off [ ] Standing Order [ ] Direct Deposit [ ] Any other (Specify) [ ]

I hereby authorize a monthly shares contribution of Ksh..... (Amount in words)
Commencing from.....

SOURCES OF INCOME

Salary [ ] Pension [ ] Any other (Specify) [ ]

Alternate Channels

Would you like to subscribe to Mobile banking & Agency banking channels? Yes [ ] No. [ ]

Terms & conditions apply ( www.kwetusacco.com ).

NOMINEE INFORMATION

I, the above mentioned, in the event of my death whilst a member of the society, hereby instruct the SACCO to pay all that amounts to me, less any debt to the society, to the person named in this section (The name of the nominee can be given in a sealed letter ). I understand that I may alter the name of the nominee in the next of kin forms/cards.

NAME..... RELATIONSHIP.....
ID NO. .... PHONE NO.. ..

**DECLARATION CLAUSE**

I ..... agree that this account shall be operated solely at the discretion of Kwetu SACCO Ltd and hereby agree to indemnify the SACCO against any loss or claims arising out of the account being closed by the SACCO without notice due to unsatisfactory performance.

I, having read and understood the General Terms and Conditions and Data Privacy statement available at Kwetu SACCO Ltd Branches or on the SACCO’s website: [www.kwetusacco.com](http://www.kwetusacco.com) hereby authorize the SACCO to use my contact details to send information about products and services including but not limited to offers and promotions which may be of interests to me. The SACCO may do this by phone calls, texts, post, email, or through any digital media.

I confirm having understood that my personal data provided in this application form shall be processed in accordance with the provisions of the Data Protections Act, 2019 (KE), and where applicable the General Data Protection Regulation (EU) 679/2016 or all other applicable laws as may be amended from time to time.

I declare that the information provided in this form is true to the best of my knowledge.

ID No \_\_\_\_\_ Sign \_\_\_\_\_ Date \_\_\_\_\_

SPECIMEN SIGNATURE

THUMP PRINT

Identify the finger

**FOR OFFICIAL USE ONLY**

**Customer Information Checklist**

I confirm that all the above details have been obtained in accordance with the KYC requirements and opening of the account is here by confirmed.

<input type="checkbox"/>	Valid Identification Doc. Obtained and authenticated	<input type="checkbox"/>	Customer Contact information available
<input type="checkbox"/>	Photographs obtained/captured and authenticated	<input type="checkbox"/>	mandated signatures Obtained
<input type="checkbox"/>	KRA PIN	<input type="checkbox"/>	Any Other

ACCOUNT NO:

Introduced By ..... ID NO..... Signature.....

Data Captured By.....Sign.....Date.....

Checked by..... Sign..... Date.....

System approved by..... Sign..... Date.....

Members File Opened By.....Sign..... Date.....

Approved by management-minute number .....

Chairman..... Secretary..... Treasurer.....