

**Complete in Duplicate**

**0572 SHERIA SACCO SOCIETY LIMITED**



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**MEMBERSHIP ACCOUNT OPENING APPLICATION FORM**

**\*Please Complete Your Details in Capital Letters**

**\*Attach a copy of your National I.D or Passport**

**1. DETAILS OF THE APPLICATION (Tick Where Appropriate)**

Mr./Mrs./Miss/Dr./Hon. Justice (As per I.D) \_\_\_\_\_

Staff/P.J./P.F No: \_\_\_\_\_ Gender: Female ☐ Male ☐

Date of Birth \_\_\_\_\_ Marital Status Single ☐ Married ☐

I.D. No. /Passport No. \_\_\_\_\_ Nationality \_\_\_\_\_

Postal Address \_\_\_\_\_ Postal Code \_\_\_\_\_ Town \_\_\_\_\_

Physical Residence \_\_\_\_\_

Mobile Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Member Introduced by (Active Member) \_\_\_\_\_

Staff/ Membership No. \_\_\_\_\_ Department \_\_\_\_\_

**2. EMPLOYMENT DETAILS (Tick Where Appropriate)**

Self Employed ☐ Salaried ☐ Retired ☐

Name of Employer \_\_\_\_\_ Telephone No: \_\_\_\_\_

Postal Address \_\_\_\_\_ Postal Code \_\_\_\_\_ Town \_\_\_\_\_

Occupation/Designation \_\_\_\_\_

Physical Location \_\_\_\_\_

Have you been a member before Yes ☐ No ☐

**3. BUSINESS DETAILS***(To be completed by a business applicant)*

Business Name \_\_\_\_\_

Business Postal Address \_\_\_\_\_

Business Physical Location \_\_\_\_\_

Nature of Business \_\_\_\_\_ Approximate Monthly Income Kshs \_\_\_\_\_

**4. CONTRIBUTION DETAILS**

I wish to make a monthly contribution of Kshs \_\_\_\_\_

Effective date (dd/mm/yy) \_\_\_\_\_

Proposed mode of remittances Check Off ☐ Standing Order ☐ Cash Deposits ☐

Have you ever been a member of Sheria Sacco Ltd in the past \_\_\_\_\_

Have you ever been a member of another Sacco \_\_\_\_\_ Which one \_\_\_\_\_

**5. F.O.S.A ACCOUNT DETAILS (Tick Where Appropriate)**

I hereby apply for an account as follows:

Ordinary Savings A/C	<input type="checkbox"/>	Education A/C	<input type="checkbox"/>
Holiday A/C	<input type="checkbox"/>	Medical A/C	<input type="checkbox"/>

**6. OTHER SERVICES (Tick Where Appropriate)**

Issue ATM Card	<input type="checkbox"/>
Mobile Banking Facility	<input type="checkbox"/>
SMS Alerts	<input type="checkbox"/>



## 7. DECLARATION

I confirm that the information given above is true to the best of my knowledge. By signing on this form, I request you to open an account in my name(s) provided. I agree to abide by the by-laws of this society.

I agree that this account shall be operated solely at the discretion of the society and hereby indemnify the society at my cost, against any cost incurred or claims arising out of the account.

Applicant's Signature

Date \_\_\_\_\_

ety By-law. Name of Witness (Must be society's Member),

Signature of Witness \_\_\_\_\_ Staff/Membership No. of Witness \_\_\_\_\_

## 8. FOR OFFICIAL USE

Date of Admission.....

Approved by CMC Minute No..... Membership No.....

Chairman.....

Treasurer..... Secretary .....

Fed by (Name)..... Date.....

Signature..... W.E.F.....

Membership Acknowledged by (Name)..... Date.....

BBF Acknowledged by (Name)..... Date.....

## 9. TERMS AND CONDITIONS

### Membership Eligibility

Any natural, legal or a group of person(s) eligible for membership of the society may apply to be members by completing an "application for membership" form, and may be admitted if they meet the following requirements:

- Is within the field of membership provided for in the bylaws.
- Is not less than eighteen years of age, if a natural person.
- Is not a member of another salary based Sacco in the country.
- Is not directly, a money lender or carrying out such activities detrimental to the objectives of the society.
- Is of good character.
- Has regular income from employment, business or trade.
- Has paid entrance fee and minimum shares as prescribed in the membership policy. h) Has completed member's nominee card, appointing a nominee(s). i) Has completed member's burial benevolent fund form, appointing dependant(s).
- Has understood the objectives of the Society, his obligations as a member and other membership requirements as stated in the Society By-law.



### Members' Rights

The following are the rights that you enjoy as a member of Sheria Sacco:

- a) Receiving, periodically and regularly, or upon request, and at least once a year, a statement of accounts containing the individualized record of your credit and debit transactions.
- b) Attending and participating in elections within the electoral zone. Each member shall have one vote irrespective of his/her total shareholding.
- c) Electing representatives to attend and participate at a general meeting.
- d) Electing or be elected as an officer of the Society, unless otherwise prohibited by any other law or these By-laws.
- e) Using the Society's services according to the policies and procedures approved by the Board of Directors.
- f) Submitting projects or initiative to the Board of Directors, for the improvement of the Society's services.
- g) Appointing a nominee.
- h) Participating in the sharing of the Society's surpluses.
- i) Accessing all legitimate information relating to the Society, including internal regulations, registers, minutes of the General Meetings, Supervisory Committee reports, annual accounts and inventories, investigation reports, at the registered office of the Society, subject to the Society's policies and regulations in force at the time.
- j) Voting on all matters put before the electoral zone.
- k) Enjoying all other rights as prescribed by the Co-operative Act and the Rules.

### Members' Obligations

As a member of Sheria Sacco you are obliged to:

- a) On admission, pay a non recurrent fee to consist of Kshs. 500 being membership registration, Kshs. 100 being Burial Benevolent Fund registration and Kshs. 500 being FOSA Account opening. A member is also required to make mandatory monthly Burial Benevolent Fund contributions amounting to Kshs. 200.
- b) Be faithful and honest in all your dealings with the Society.
- c) Observe the law, the rules and these By-laws whenever transacting any business with the Society.
- d) Observe the code of conduct and ethics of the Society, and in particular desist from any corrupt practices in all dealings with the Society.
- e) Refrain from engaging in the business of money lending in competition with the Society.
- f) Protect the image of the Society and avoid unnecessary publicity, incitement or careless talk that can injure the reputation of the Society.
- g) Inform the Chief Executive Officer in writing of change of my physical address and contact details whenever they occur,
- h) Pay my debt obligations to the Society without fail and save regularly with the Society,
- i) Seek cooperative education to improve my awareness and enlightenment on cooperative matters.
- j) Attend meetings and education forums and take part in Society's decision-making.
- k) Inform non-members and encourage them to join the Society.
- l) Identify problems affecting the Society and suggest solutions,
- m) Participate in the Society's projects, both physically and financially,
- n) Make use of the services of the Society as stated in its objects,
- o) Comply with these By-laws, the Co-operative Act, the Sacco Act, Rules, Regulations and resolutions of General Meetings.

### General Conditions of Use of the Saccolink Card

- a) The SaccoLink Card is neither a credit card nor a cheque guarantee card and shall not be presented as such.
- b) The SaccoLink Card is for use only at Coop Bank ATMs, other Bank Visa branded ATMS and at Visa branded merchant point of sales.
- c) The Sacco/Bank reserves the right to withdraw the use of SaccoLink card transaction at any time and without prior notice.
- d) The SaccoLink Card once issued to the Cardholder is not transferable.
- e) The SaccoLink Card is the property of the Sacco and the Card holder undertakes to return the card to the Sacco or Sacco/Fosa on demand.
- f) The card must not be used for any unlawful purpose, including the purchase of goods or services prohibited by local and international law.
- g) Terms and conditions for use of the SaccoLink Card apply. These terms and conditions may be amended at any time by notice from the Sacco to the Cardholder.