

FARMER REGISTRATION

PERSONAL INFORMATION

Surname	First Name	Middle name
<hr/>		
Gender	Date of Birth	Marital Status
<input type="radio"/> Male <input type="radio"/> Female	<u>mm / dd / yyyy</u>	<input type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Widowed
Name of Spouse		
<hr/>		
Present Address		
<hr/>		
Permanent Address		
<hr/>		
Mobile Number	Home Phone Number	Government ID No. (SSS/GSIS/PhilHealth)
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Bank Account No. (if any)	Email Address	
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FARM / LIVELIHOOD INFORMATION

Barangay / Sitio	Farm / Location Address	Land area (e.g. sq.m / hectare)
<hr/>		
Main livelihood		
<input type="checkbox"/> Crops <input type="checkbox"/> Livestock <input type="checkbox"/> Poultry <input type="checkbox"/> Fishing <input type="checkbox"/> Mixed		
Land tenure		
<input type="checkbox"/> Owned <input type="checkbox"/> Leased <input type="checkbox"/> Communal <input type="checkbox"/> Other		

APPLICATION TYPE

☐ New Member ☐ Re-Activate ☐ Update Records

Transfer From

Transfer To

BENEFICIARIES (SURNAME, FIRST NAME, MIDDLE NAME)

#	FULLNAME (LAST, FIRST, MIDDLE)	DATE OF BIRTH	RELATIONSHIP
1	<hr/>	<u>mm / dd / yyyy</u>	<hr/>
2	<hr/>	<u>mm / dd / yyyy</u>	<hr/>
3	<hr/>	<u>mm / dd / yyyy</u>	<hr/>

If no beneficiaries nominated, the Cooperative will follow legal heirs per hierarchy rule: spouse for married, parents for single.

AGREEMENT

I declare that the information above is correct. I have read and understood the policies and rules of the Cooperative and agree to its terms and conditions. I consent to the use of my data per the Cooperative's Data Privacy Policy.

Signature over Printed Name	Date
<hr/>	<u>mm / dd / yyyy</u>

COOP APPROVAL (FOR OFFICE USE ONLY)

Registration ID No.	Date Approved	Received by
<hr/>	<u>mm / dd / yyyy</u>	<hr/>