

MEMBERSHIP APPLICATION FORM

MFI/BANK/COOP INFORMATION

Name of MFI:		SEC/CDA Reg No.	
MFI Initials:		TIN:	
Head Office Address:		Zip Code:	
Website Address:		Email Address:	
Telephone No(s):		Fax No(s):	
Contact Person:		Designation/Position:	
Mobile No(s):			
HO Office Days:		Office Hours:	

PERSONAL INFORMATION OF AUTHORIZED SIGNATORY

Any one	Any Two	All - add 1 more
Name:	Specimen Signature	
Designation:		
Address:		
Telephone No(s):	Fax No(s):	
Mobile No(s):	Email Address:	

PERSONAL INFORMATION OF AUTHORIZED SIGNATORY

Name:			
Designation:			
Address:			
Telephone No(s):	Fax No(s):		
Mobile No(s):	Email Address:		

PERSONAL INFORMATION OF COMPLIANCE OFFICER	PERSONAL INFORMATION OF IT OFFICER
Name :	Name :
Email Address:	Email Address:
Contact #:	Contact #:

SUBMITTED BY

DATE SUBMITTED

Signature(s) of Authorized Signatory

Checklist of Membership Requirements

Memorandum of Agreement / Service Agreement	Secretary's Certificate Board Resolution
SEC/CDA Cert. of Registration, Art. of Incorporators & By Laws	Business Permit
Current General Information Sheet	ID of the Authorized Representative
Previous Years Annual Report	Financial Statement
ID of the Authorized Representative	BIR Reg Cert

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Received by:	Reviewed by:	Recommended for Approval by:	Approved Disapproved Deferred	Remarks:
Date:	Date:	Date:	Date:	Signature of RuralNet Officer: