

**VALENZUELA CITY GOVERNMENT EMPLOYEES COOPERATIVE**

A. Pablo St., Malinta, Valenzuela City
Telephone Nos. 7002-2919 / 352-1000 loc. 1815
CDA REG. CRA-MLA 2632-0942

(Recent Photo)
1" x 1"

APPLICATION FOR MEMBERSHIP
MEMBER'S INFORMATION SHEET
(PRINT LEGIBLY AND FILL UP THIS FORM COMPLETELY)

ACCT. NO.: _____

EMPLOYEE ID NO.: _____

I hereby apply for membership at **VCGEC**. I agree to obey its rules and regulation as stated in its Article of Cooperation & By-Laws, the decisions of the General Assembly and the policies of the Board of Directors.

I pledge to:

1. Attend and finish the prescribe Pre-Membership Education Seminar on _____.
2. Pay the membership fee of Php _____ and seminar fee of Php _____ (during the seminar).
3. Pay the minimum paid-up capital of Php _____.
4. Subscribe to _____ shares equivalent to Php _____ worth of share capital at Php 50.00 per share, payable within _____ months/year through capital build-up schemes provided by the cooperative.
5. Pay the initial savings deposit of Php 200.00
6. Attend annual membership (general assembly) meeting
7. Patronized at least one (1) loan/rediscounting/special loan and other Coop services every year.

Signature over printed name _____

Date _____

O.R. Number: _____

Total Amount: _____

Date of O.R: _____

Payment Received By: _____

PERSONAL DATA:

NAME: _____ NICKNAME/S: _____
(Last Name) (First Name) (Middle Name) (Maiden Name)

SEX: ☐ Male ☐ Female
GENDER: ☐ Boy ☐ Girl ☐ Lesbian ☐ Gay ☐ Transgender
CIVIL STATUS: ☐ Single ☐ Married ☐ Widower ☐ Divorced ☐ Separated

ADDRESS: _____ ZIP CODE: _____
PROVINCIAL ADDRESS: _____ ZIP CODE: _____
PLACE OF BIRTH: _____ COUNTRY OF BIRTH: _____
NATIONALITY: _____ RELIGION: _____
DATE OF BIRTH: _____ AGE: _____ BLOOD TYPE: _____
HIGHEST EDUCATIONAL ATTAINMENT: _____ NO. OF CAR/S OWNED: _____
CELLPHONE NO.: _____ HOME TEL. NO.: _____
E-MAIL ADDRESS (if any): _____ OFFICE TEL. NO.: _____
TIN ID NO.: _____ GSIS POLICY NO.: _____ SSS ID NO.: _____

BANK INFORMATION:

PRIMARY ACCT. NO. (LANDBANK): -
SECONDARY ACCT. NO. (PNB): -

EMPLOYMENT DATA:

OFFICE/DEPARTMENT: _____ DETAILED OFFICE/DEPARTMENT: _____
PRESENT POSITION: _____ SOURCE OF INCOME: _____
MONTHLY SALARY: Php _____ GROSS ANNUAL INCOME: Php _____
STATUS OF APPOINTMENT: ☐ Permanent ☐ Co-Terminus ☐ Contractual
☐ Casual ☐ Elective ☐ Other _____
DATE/YEAR STARTED: _____

FAMILY BACKGROUND:

MOTHER'S MAIDEN NAME: _____
FATHER'S NAME: _____

SPOUSE NAME: _____ DATE OF BIRTH: _____
ADDRESS: _____ ZIP CODE: _____
E-MAIL ADDRESS (if any): _____ CELLPHONE/TEL. NO.: _____

NAME OF QUALIFIED DEPENDENTS/BENEFICIARIES	RELATIONSHIP	DATE OF BIRTH
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

IN CASE OF EMERGENCY:

CONTACT PERSON: _____
ADDRESS: _____ CELLPHONE/TEL. NO.: _____

ACTION TAKEN: ☐ Approved ☐ Disapproved

Chairman of the Board

This application for membership was approved/disapproved by the Board of Directors in meeting held on _____,
20_____; BOD Resolution No. _____ Series of _____.

ATTESTATION:

I hereby certify that the above information is true and correct to the best of my knowledge.

Signature over printed name Date

Referred/Recruited By: _____
Office: _____



VALENZUELA CITY GOVERNMENT EMPLOYEES COOPERATIVE

City Social Hall, City Government of Valenzuela, Mac Arthur Highway,

Karuhatan, Valenzuela City

Telefax: 444-11-32

Telephone No. 352-1000 local 1815

CDA REG. CRA-MLA 2632-0942

SUBSCRIPTION AGREEMENT

I/ Mr./Ms./ _____ single/married/ of legal age
a resident of _____ Telephone No. _____
(Res.) _____ (Office) _____ (Mobile) _____
do hereby apply to subscribe to the share capital of VALENZUELA CITY GOVERNMENT
EMPLOYEES COOPERATIVE (VCGEC) in accordance with the terms and conditions stipulated
hereunder.

I agree to subscribe _____ shares each having a par value of Php 50.00 amounting to
Php _____ and to effect the payment thereon as provided herein below (check one
below).

____ 1. To pay the full subscription amount in cash (one-time payment) immediately
after approval of this subscription.

____ 2. To pay the full subscription amount in cash on _____.

____ 3. To pay Php _____ initial share capital and _____ share within six (6)
months from the date of membership and the balance Php _____ to be paid on:
_____ as final settlement of the total subscribed value.

I further affirm that I have carefully read the Articles of Cooperation and By-laws issued by
VALENZUELA CITY GOVERNMENT EMPLOYEES COOPERATIVE (VCGEC) in connection
with the shares that I am subscribing to and have fully understood and accepted the terms, conditions
and obligations stipulated therein.

Signature of Subscriber Over-Printed Name

Date _____

Approved by:

Chairman of the Board – VCGEC

Date _____

Board Resolution No. _____