### **ARCHDIOCESE OF NAIROBI**

## **SOCIAL PROMOTION REGISTERED TRUSTEES**

# ST. JOSEPH MUKASA SELF HELP GROUP

## **COMPLETE THIS FORM IN BLOCK LETTERS**

## 1. APPLICATION FOR MEMBERSHIP

I hereby make an application	for memb	ership and agree to co	nform to th	ne groups' guidelines and amendment thereof:
Full NameMr./Mrs./Miss/Dr,	Prof/Rev.			
ID NO	Parish	1		
Outstation	Small	Christian community		
Address	Telep	hone		
No of shares KSHS		Per month		
W.E.F20		SIGNATURE OF APPL	ICANT	
Kshper shar	e minimu	m of		
PAYABLE ON APPLICATION	<u>l:</u>			
Registration fee KSHS	. 300/=	Registration form		KSHS.100/=
Passbook KSHS	. 150/=	Benevolent fund	KSHS.	50/=
Minimum savings per month	KSHS.250	/=		
Strategic plan KSH. 200/=				
TOTAL PAYABLE KSHS	. 1050/	=		
I hereby agree to deposit th	e above a	mount		
Pay at: - CO-OPERATI	VE BANK	BRANCH:	GITHUR	AI
A/C NAME : ST. JOSEPH N	1UKASA S	.H.G. A/C NO. :	011341	55999700
M-pesa pay bill : 527515	acc no	: member number (ful	I names for	r new members)
2. NOMINATED BENEF	<b>ICIARY</b>			
		·	•	ruct the group to pay all the amounts due to m
less any debts to the group to	the pers	on named in this section	n(The nam	e of the nominee can be given in a sealed
letter). I understand that I ma	y alter th	e name of the Nomina	ted Benefic	iary by filling in subsequent beneficiary:
Nominated Beneficiary (FULL	NAME)			I.D NO
Relationship to the Applicant			Address	5
Telephone				
Signature of Applicant		Date		
3. FOR GROUP OFFICIA	L USE C	NLY		
1. Date of admission to Mem				
Membership registered No	•			
• • •	Date			
2. Date of Withdrawal				
	•	•		n2