**MEMBERSHIP APPLICATION FORM-INDIVIDUAL**

**COMPLETE THIS FORM IN BLOCK LETTERS**

I hereby make application for membership and agree to conform to the society by laws and any amendments thereof

**DETAILS OF APPLICANT**

AFFIX PHOTO HERE

NAME MR/MRS/MISS/DR/HON/ REV. (AS PER ID.)

…………………………………………………………………………………….

ID NO…………………………………………

EMAIL ADDRESS……………………………………………………

PHYSICAL/POSTAL ADDRESS………………………………………………

MOBILE NO………………………………………………………….

**CONTRIBUTION DETAILS**

I wish to make a Monthly CONTRIBUTION OF KSH………… Effective date …...................

Membership Fee and Monthly contribution to be paid to **EDEN PRESBYTERIAN SACCO SOCIETY LTD, EQUITY BANK KIAMBU BRANCH ACCOUNT NO. 0640274213502 OR MPESA PAYBILL BS NO. 524139; ACCOUNT NO. YOUR NAME**

**DECLARATION**

**I confirm that the information given above is true to the best of my knowledge. I agree to abide by the bylaws of the society**

**Applicant’s signature…………………………………………. Date……………………**

**FOR OFFICIAL USE.**

**Date of admission……………………………**

 **Membership No…………….**