

WA-OMAERA SACCO LTD

P.O BOX 78780-VIWANDANI NAIROBI

TEL: +254 769425728

MEMBERSHIP APPLICATION FORM

*Affix a passport
photo*

1. FULL NAME-----EMPLOYER-----
I.D NUMBER (*ATTACH COPY*) -----ADDRESS-----
DATE OF BIRTH-----TELEPHONE NO-----
E-MAIL ADDRESS.....

HOME DISTRICT-----LOCATION-----

SUBLOCATION-----

2. MEMBERSHIP FEE: KSH 1500

REINSTATEMENT FEE: KSH 3000

MINIMUM MONTHLY CONTRIBUTION KSH 3000

MONTHLY CONTRIBUTION: -----

3. I-----EXPRESS MY

*WILLINGNESS AND INTEREST IN THE SOCIETY AND PROMISE TO
PROMOTE ITS DEVELOPMENT*

SIGNATURE-----DATE-----

FOR OFFICIAL USE ONLY.

1. CHAIRMAN-----
2. SECRETARY-----
3. TREASURER-----
4. INTRODUCED BY-----

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*Affix a passport
Photo here*

NOMINATION FORM

I..... of ID NO..... of post office.....
..... Being a member of Wa- omaera Sacco Ltd, Member No:.....hereby
nominate the following nominee(s) to inherit my shares or interest in the said society in the
following manner:

<u>No</u>	<u>Name Of Nominee</u>	<u>Relationship</u>	<u>% Of Shares /Interest</u>	<u>Telephone No</u>	<u>I.D No</u>

SIGNATURE..... DATE.....

WITNESSED BY:

1) NAME..... ID NO.....

ADDRESS..... SIGNATURE.....

2) NAME..... ID NO.....

ADDRESS..... SIGNATURE.....

FOR OFFICIAL US ONLY

CHAIRMAN.....

SECRETARY.....

TREASURE.....