



PEFA NAIROBI CENTRAL SACCO LIMITED

Solar house along Harambee avenue 3rd floor right wing

P.O BOX 79459-00200 NAIROBI

Telephone: +254799 944 122 / +254 728 292 836

Email: info@pefasacco.co.ke

EMMANUEL JUNIOR MEMBERSHIP FORM

Please complete this form in block CAPITAL Letters.

I wish to open the following account and undertake to comply, observe and be bound by the Terms and Conditions and tariffs made by the Sacco in force and as amended from time to time pertaining to such accounts per the General Terms and Conditions document availed and read by me.

Name of the Child:

Surname _____ First Name: _____ Middle Name: _____
Date of birth _____ Birth Certificate No _____ Gender _____

PARENT/GUARDIAN:

First Name _____ : Middle Name: _____ Last Name _____

ID/Passport Number----- Date of Birth-----

Postal Address: -----code----- Tel-----

Mobile No -----Residential area-----

Occupation/Business-----

Nominee _____

ID No -----Mobile No-----

Signature -----Date-----

REQUIREMENTS

1. Birth Certificate/Notification/Baptismal card,
2. Two coloured pass port-sized photos,
3. Parent's/Guardian's ID copy,
4. Membership fee 500/=
5. Pass book fee
6. Minimum savings 500/=
7. Transaction fee 100/=

OFFICIAL USE ONLY

Date Received-----A/C No-----
Approved by-----Date-----
Filed by-----Date-----
Chairman/Secretary/Treasurer-----