



PLEASE COMPLETE ALL SECTIONS BELOW IN CAPITAL LETTERS

| Personal Information | | |
|---|---------------------------------|--|
| Title: Mr Mrs Others (please specify) | | |
| | | |
| Name Surname First name | Middle name | |
| HOME ADDRESS | | |
| (Give a clear description of your house addre | ess) | |
| PHONE NUMBERBVN | | |
| DATE OF BIRTH Marital Status: Single | Married Others (Please Specify) | |
| | | |
| Means of Identification | | |
| ID TYPE: International Passport Driver's License National | ID Voter's Card Others | |
| ID NUMBER ID ISSUED DATE: | ID EXPIRY DATE: | |
| | | |
| Employment Details | | |
| | | |
| Employer's Name | | |
| Office Address | | |
| City LGA State | | |
| | | |
| Next of Kin Details | | |
| | | |
| Name: | | |
| Address: | | |
| Phone Number: Alternative Number | Relationship: | |
| | | |
| Other Bank Account Details | | |
| Bank Name | Account Number | |
| | | |
| | | |
| | | |
| | | |

| Declaration | |
|---|---|
| 1 | hereby acknowledge that understand that information given |
| herein and supplied are basis for account opening and | d therefore warrant that such information is correct. |
| Name | Signature & Date |
| Registration Fees: This will be a deduction from the monthly contribution e.g., for member contributing N1,000 daily, we will deduct N1,000 out of the total contribution for the month. Minimum Contributory Amount: The minimum daily contribution per member will be N500 Maximum Credit Limit: Customer will be entitled to take loan after three (3) months consistency in contributions and can be eligible for twice of the three months contribution. Interest: The interest rate for contributions will be 2% of total contributions for three (3) months. Withdrawal: Members who are willing to withdraw before three months will not be entitle to interest of 2 %. Loan: Member will be eligible for loan by meeting up with the loan requirements. | |
| For Official Use Only | |
| Address Visited | |
| Comment on Location- Landmarks: | |
| Location- Color of Building: | |
| Full Name of Visiting Staff: Signature | |
| Certification | |

I hereby confirm that information contained herein is correct and a true representation of the customer's profile.

Signature: