



KENYA TEACHERS SACCO ASSOCIATION

MEMBERSHIP APPLICATION FORM

1. Name of society.....
Postal Address.....Code.....Town.....
Telephone No.....
KRA Pin No.....
Physical Address.....
Street/Road.....
Registration No.....
Date of Registration.....
Number of Members.....

2. We, the undersigned officials of

.....
Hereby apply for membership in “**KENYA TEACHERS SACCO ASSOCIATION (KETSA)**” for our Society. We undertake to abide by all the membership conditions of KETSA as contained in its constitution. Attached here with, is our cheque. for the sum of Ksh.....

being: -

- a) Affiliation fee of Ksh. 10,000
- b) 2,000 Shares of ksh100 each TOTAL KSH 200,000(Minimum)
- c) Annual subscription of Ksh. 150, 000

Please provide us with a copy of: -

- a) KRA pin certificate.
- b) Certificate of registration.

UNITY OUR STRENGTH



+254 729 339999
+254 713 614609



Police Sacco Building, 4th floor Wing A
Ngara, Nairobi



info@ketsa.co.ke
www.ketsa.co.ke

FOR AND ON BEHALF OF.....
SACCO SOCIETY LIMITED

<u>NAME</u>	<u>SIGNATURE</u>
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CHAIRMAN: _____	_____
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SECRETARY: _____	_____
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TREASURER: _____	_____
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DATE: _____



STAMP

Signed in accordance with a resolution passed at the Board meeting held on.....

Minute No.....