

P O Box 45821 Riverwalk, Gaborone

Tel: +267 3902023

Email: <a href="mailto:info@thutosaccos.co.bw">info@thutosaccos.co.bw</a>
Website: <a href="mailto:www.thutosaccos.co.bw">www.thutosaccos.co.bw</a>
Extension 3, Plot 140, Gaborone

## **APPLICATION FORM FOR MEMBERSHIP**

## A) PERSONAL DETAILS

Tick as applicable (Mr/Mrs/Ms/Dr/Prof.)
Gender: Male Female
Name: Surname:
Date of Birth:
ID No:
Tel No. Home:
Cell No:
Email Address:
Marital Status: Single Divorced Widowed
If married: Married in Community  Married Out of Community
Postal Address:
Physical Address (Plot number, Street name & Ward)
B) Ordinary Savings Amount:
Administration Fee: P25.00
N.B: To be a member of Thuto SACCOS it is compulsory to have an Ordinary Savings account





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## C) EMPLOYER'S DETAILS Organization Name\_\_\_\_\_ Department: Occupation: Tel No. Work: D) BENEFICIARY'S DETAILS 1. Full Name: Cell No: \_\_\_\_\_ Date of birth: \_\_\_\_ Relationship: 2. Full Name: Cell No: \_\_\_\_\_\_ Date of birth: \_\_\_\_\_ Relationship: \_\_\_\_ E) Where did you first hear about Thuto SACCOS? Please select all that apply ☐ Social Media □ Radio □ Billboard □ Newspaper ☐ Word of mouth Other: I hereby apply for membership in your society and agree to abide by the society's Bylaws and any amendment thereof. Signature of Applicant: \_\_\_\_\_

