



Tel: 254-020-2733601/3
Fax 254-020 -2733598
Email: admin@kimitusacco.or.ke
Website: www.kimitusacco.or.ke

KIMISITU SACCO PRE-MEMBERSHIP DATA FORM

Please attach your organization's copy of registration certificate and brochure.

Name of
(Herein after referred to as "The Organization")

Physical Address:

Organization: _____

Postal Address:

Telephone:

E-mail:

Institution's Category:

- a) Non-Governmental Organization (NGO)
- b) International Organization
- (c) Embassy/High Commission
- d) Others (please specify)

Date of registration:

Total number of Staff: _____

Office Locations or branches:

	Location/ Branch	No. of Staff
1		
2		
3		
4		
5		
6		

How did you know about KIMISITU?

The organization does not object to its employees joining KIMISITU SACCO and hereby undertakes to remit members' monthly contributions and loan deductions directly to KIMISITU SACCO.

Signed on behalf of the organization by: Payroll Officer/ Human Resource Manager

Name: _____

Designation: _____

Signature & Stamp: _____

Date: _____

For official use only.

KIMISITU SACCO Membership Admission

Admission Approved _____

Declined: _____

Reasons for Declining: _____

Membership No: _____

Date Registered: _____

Signed on behalf of KIMISITU SACCO Board of Directors:

Name:

Designation:

Signature:

Date:
