

WANANDEGE SAVINGS & CREDIT CO-OP. SOCIETY LTD

Front Office Services Activity APPLICATION TO OPEN A PERSONAL SAVINGS ACCOUNT

I/We the undersigned hereby apply to open a Savings Account to be styled as follows:
Account Name:
My/Our particulars are as detailed here below:

Personal Details:	1st Applicant	2 nd Applicant	3 rd Applicant
Date of Birth			
Nationality			
Post box/Post code			
Mobile phone			
E-mail			
Town			
Employer			
Duty Station			
Employee S/No			
Employers address			
Residence			
District			
Location			
Sub-Location			
Present Bankers			
Branch			
Next of Kin			
Relationship			
Referee Name			
Referee ID No			
Referee Account No			
Referee Signature			
Indemnity Clause:		•	

I/We understand that this account shall be operated solely at the discretion of the Sacco and hereby agree to indemnify the Sacco at my/our cost against any loss or claims arising out of the account being closed by the Sacco without notice due to unsatisfactory performance. Yours Faithfully,

NAME	SIGNATURE	1D.NO	DATE

FOR OFFICIAL USE ONLY	, -	
Account No	Authorized Signator	y