

DIMKES SACCO/FOSA

ACK DIOCESE OF MT. KENYA SOUTH P.O. BOX 886 - 00900, KIAMBU

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IUNIOR STAR MEMBERSHIP APPLICATION FORM

	JUNIOR STAR IVIEWIBERSHIP AFFEICATION FORM	
JUNIOR STAR ACCOUNT DI	ETAILS	
		JUNIOR STAR MEMBER's
3.4.09		PHOTO
Birth Certificate No:	Date of Birth	
Gender: Male Fema	ale	
B. All Junior Star account he	olders must have an adult signatory (ies) to open an a	account
Adult Signatory details:		
Signatory 1		
	Full name	ID NO
1	PASSPORT NO	Mobile No
	Box No Code Mobile I	No.2
19	Residence	
	Relationship to the Junior Star	Signature
Signatory 2		
		ID NO
	Full name	
	PASSPORT NO	Mobile No
a -	Box No Code Mobile	No.2
	Residence	
	Relationship to the Junior Star	Signature
8 To 1 To		
Signing Mandato, whore he	th parents are signatories	
	nt holder with DIMKES)	
C. Nominated adult contact		
		numstances
	minate an adult contact for use in case of unforeseen circ	
	ode Address	
Box No C	oue Address	
Kecinence		

Your faithful financial partner

D. Terms and Conditions.

- 1. The age at which withdrawal facility passes from the adult to the junior will be at 18Years. Below that age only the adult signatory can make withdrawals. Above (and including) that age only the junior can make withdrawals.
- 2. A junior star account holder is not eligible to apply for loans.
- 3. Refusal of admission-The management committee may refuse admission to a person after assigning reasons for their decision. In this case a parent or guardian has a right to appeal to the annual general meeting and further as provided in the co-operative society Act.
- 4. A Junior Star account ceases being operational under the following conditions:
 - Death
 - Voluntary withdrawal.
 - Ceasing to hold qualifications stated by the society's policies
 - Being declared bankrupt in a court of law
 - Becoming certifiably insane.
 - Attainment of 18 years the Junior Star account automatically changes to a Normal Deposits account.

E. HOW DID YOU KNOW ABOUT US?					
Newspaper Social Media Anor	ther Member	Sales Representative	(if so kindly		
indicate the name of the Sale Representative)					
Others Specify					
- Andrews		to talingavani			
F. DECLARATION					
We/I hereby make an application on behalf of our/my Child for membership and agree to conform to the society's policies and amendments thereof.					
1. NAME	SIGNATURE	DATE			
2. NAME	SIGNATURE	DATE			
WITNESS (Sacco official only)					
Name	Signa	ture			
FOR OFFICIAL USE ONLY					
Check list: (Tick appropriately)					
Junior Star					
Passport Photo					
Copy of Birth certificate/Valid passport	i deli ludi				
Reg Fee 500					
Parent/Guardian					
Passport photo					
Copy of ID/Valid passport		STATE OF STREET TENANT AND STREET			
Account No			C. Naminsted adult con		
Registration date	Image No	Tromited Hilbs do pleminor			
Verified by					
Authorized by	Signature	10074 450			
Your faithful financial partner					