



SIMON AND SONS COOPERATIVE SOCIETY

"Growing Together, Harvesting Prosperity"

MEMBER REGISTRATION FORM

Savings & Credit Cooperative Membership Application

Form No.

Date of Application

Recruited / Referred by (if any)

A. PERSONAL INFORMATION

Full Name (as per ID)

Date of Birth
(dd/mm/yyyy)

Place of Birth

Nationality

Sex: ☐ Male ☐ Female

Marital Status: ☐ Single ☐ Married ☐ Widowed
☐ Divorced

National ID / Passport No.

ID Expiry Date

Phone Number

Alternative Phone Number

Email Address (optional)

Affix recent passport-size photograph

B. RESIDENTIAL ADDRESS

State

County / Payam

Boma / Town / Village

Physical / Postal Address

C. MEMBERSHIP CATEGORY

I am applying to join Simon and Sons Cooperative Society as a: ☐ Farmer ☐ Trader / Business Owner
☐ Salaried Employee ☐ Other

Briefly describe your farm, business, or main source of income

**D. IDENTIFICATION DOCUMENTS ATTACHED**

Tick all documents that are attached to this application.

- ☐ Copy of National ID / Passport
- ☐ Recent passport-size photographs (2 copies)
- ☐ Copy of next of kin's ID (where available)
- ☐ Introduction letter from Local Authority / Chief / Existing Member (where applicable)

E. NEXT OF KIN / BENEFICIARY DETAILS

In the event of the member's death, benefits due from the Cooperative shall be paid to the beneficiary/ies named below.

Full Name	Relationship	Phone Number	ID Number	% Benefit Share

F. GUARANTOR DETAILS

For future reference only. Guarantors listed here may be contacted when the member applies for a loan or credit facility; this section does not constitute a loan application and creates no immediate obligation.

Full Name	ID Number	Phone Number	Relationship to Applicant	Occupation	Signature

G. INITIAL CONTRIBUTION & SHARE CAPITAL

Registration Fee Paid (SSP)	Receipt No.
Initial Savings Deposit (SSP)	Receipt No.
Number of Shares Subscribed	Value per Share (SSP)
Mode of Payment: ☐ Cash ☐ Mobile Money ☐ Bank Transfer	
Payment Reference / Transaction No. (if applicable)	

H. DECLARATION, TERMS & CONDITIONS

Please read the following carefully before signing. By signing this form, the applicant agrees to be bound by all the terms set out below and by the Constitution and By-laws of Simon and Sons Cooperative Society ("the Cooperative"), as amended from time to time.

- I declare that the information provided in this application, including all supporting documents, is true, complete, and accurate to the best of my knowledge, and I understand that any false or misleading information may result in rejection or termination of my membership.
- I understand that membership is subject to review and approval by the Board / Management Committee of the Cooperative, and that submission of this form does not by itself guarantee membership.
- I agree to pay the prescribed registration fee and to maintain the minimum share capital and/or savings contribution determined by the Cooperative from time to time.
- I agree to abide by the Cooperative's Constitution, By-laws, policies, and any resolutions lawfully passed by its members or governing committee, and to attend member meetings as required.



5. I understand that my savings and share capital form part of a common fund used to extend credit and services to members, that returns on savings and shares are not guaranteed, and that they are subject to the Cooperative's financial performance.
6. I understand that access to loans or other credit facilities requires a separate application, credit assessment, and approval, and that these are not automatically granted upon membership.
7. I authorise the Cooperative to verify the information I have provided, including my identification documents, and to contact my next of kin, guarantors, referees, or employer where necessary.
8. I consent to the Cooperative collecting, storing, and processing my personal data for the purposes of membership administration, credit assessment, and communication, and understand that my information will be kept confidential and used only for legitimate Cooperative business.
9. I understand that I may voluntarily withdraw my membership by giving written notice to the Cooperative, subject to settlement of any outstanding obligations and the Cooperative's exit procedures then in force.
10. I understand that the registration fee is non-refundable, and that withdrawal of savings and share capital is subject to the notice periods and procedures set out in the Cooperative's By-laws.
11. I understand that the Cooperative reserves the right to suspend or terminate membership for conduct that breaches its Constitution, By-laws, or the interests of fellow members.
12. I release and indemnify the Cooperative, its officers, and employees from any liability arising from incomplete or inaccurate information that I have provided in this application.

By signing below, I confirm that I have read, understood, and agree to the declaration and terms above.

Applicant's Signature

Date

WITNESS (staff member or existing member)

Witness Full Name

Membership No. / Staff ID

Witness Signature

Date

FOR OFFICIAL USE ONLY

Membership Number Assigned

Date Received

Received By (Name)

Verified By (Name)

Registration Fee Received (SSP)

Receipt No.

Date

Initial Savings Received (SSP)

Receipt No.

Date

Recommended for Approval: ☐ Yes ☐ No

Reason, if not recommended

APPROVAL

Chairperson — Signature

Secretary General — Signature

Date

[Official Cooperative Stamp]