



# Gayaza High School Old Girls Savings and Credit Cooperation Organisation (GOG SACCO)

BMK House, Plot 4-5 Nyabong Road, Wampewo Avenue  
P.O.Box 21625 Kampala  
Tel: +256772438536 and +2562694071

## MEMBERSHIP ACCOUNT OPENING APPLICATION FORM

GOG SACCO Number: \_\_\_\_\_

Please tick, are you joining the SACCO as an individual [ ] or as a group [ ]

Note: If joining as an individual or as a group, this form will strictly capture details of one person. The SACCO has made provisions under Section 6, 'Designation of Beneficiary,' to delineate the identities of a minimum of six (6) committee members representing the group. Please be advised that the SACCO maintains a policy of non-interference with respect to the internal affairs and management of the group.

Complete your Details in Capital Letters and attach the following Documents:

1. Applicant's ID /passport copy.
2. Applicant's passport size photo.

### 1. DETAILS OF THE APPLICANT

SURNAME:	FIRST:	OTHERS:
MR./MRS./DR./MISS./MS.	GENDER:	DATE OF BIRTH (DD/MM/YY)
MARITAL STATUS:	NATIONALITY:	ID/ PASSPORT No.
EMAIL ADDRESS:	PHYSICAL RESIDENCE:	MOBILE PHONE No.
POSTAL ADDRESS:		COUNTRY:

### 2. OCCUPATION

### 3. MEMBERS BANK DETAILS

BANK NAME :	BRANCH	ACCOUNT NO.
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### 4. PERMANENT ADDRESS

### 5. CONTRIBUTION DETAILS

I agree to make a minimum monthly saving Shs. 100,000 per month. **Please Note:** The mandatory minimum monthly saving amount is Shs 100,000/- but a member may save over and above this minimum as they may wish.

If my application is accepted, I agree to pay the one-off registration/entrance fee of Shs 100,000, buy at least 2(two) shares with each share costing Shs. 50,000; pay the annual subscription of Shs. 50,000 and pay the minimum savings amount of Shs 100,000/- **Please Note:** These are the minimum initial (first month) contributions. You are encouraged to increase your contributions in savings and shares in the consequent months.

NUMBER OF SHARES INITIALLY PURCHASED (FIRST MONTH):	
AMOUNT SAVED INITIALLY (FIRST MONTH):	

## 6. DESIGNATION OF BENEFICIARY

I hereby designate the person(s) named below to receive all my dues from the SACCO in the event of my death. I understand that this will remain in force until changed or revoked by me in writing.

I understand that if I have named more than one person, if one of the named people dies, the share of that person will be divided equally among the other survivor(s). This form will be void if none of the above-named beneficiary (are) is alive at the time of my death. I hereby reserve the right to cancel or change the beneficiaries at any time by executing another instrument.

FULL NAME(S)	NATIONAL ID/PASSPORT NUMBER (where applicable)	EMAIL ADDRESS	RELATIONSHIP TO MEMBER	TELEPHONE NUMBER	% ALLOCATION

## 7. BANK ACCOUNTS

### GAYAZA HIGH SCHOOL OLD GIRLS' SAVINGS AND CREDIT COOPERATIVE ORGANISATION BANK ACCOUNT DETAILS.

Account Title: GAYAZA HIGH SCHOOL OLD GIRLS SAVINGS AND CREDIT COOPERATIVE ORGANISATION

STANBIC BANK/ Garden City Branch /Account Number: 9030020238967/ Sort Code: 040147

## 8. DECLARATION

I confirm that the information given above is true to the best of my knowledge. By signing on this form, I request you to open an account in my name(s) provided. I agree to abide by the by-laws of this society. I have read and agreed to abide by the Terms and Conditions of this application. I agree that this account shall be operated solely at the discretion of the SACCO and hereby indemnify the SACCO at my cost, against any cost incurred or claims arising out of the account.

I confirm to:-

- Observe the law, the rules and the by-laws whenever transacting any business with the SACCO.
- Pay my debt obligations to the SACCO without fail and save regularly with the SACCO.
- Be faithful and honest in all my dealings with the SACCO.
- Observe the code of conduct and ethics for the SACCO and desist from any corrupt practices in all dealings with the SACCO.
- Protect the image of the SACCO and avoid unnecessary publicity, incitement or careless talk that can injure the reputation of the SACCO.
- Support issues put forth that improve the sustainability of the SACCO and promote the goodwill of all members.
- Buy and pay for shares and make any other contributions provided in the Bylaws of the SACCO
- Attend meetings and education forum and take part in decision-making.
- Comply with the By-laws, the Co-operative Societies Act, Rules and Regulations and General Meeting Resolutions.

Please sign in the spaces provided

## 9. REFEREES (Must be a Gayaza High School old girl)

Name: NIN/Passport .

Name:

Year at Gayaza High School:

Year at Gayaza High School:

Telephone:

Telephone:

Signature:

Signature:

**10. FOR OFFICIAL USE ONLY**

Comments:

APPROVED

REJECTED

Date:

Signature

Date:

Signature