SINENDET TEA MULTI-PURPOSE CO-OPERATIVE SOCIETY LIMITED
P.0.B0X 2147 – 20200 KERICHO.

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FORM SOAF.

OFFSPRING'S APPLICATION FORM FOR MEMBERSHIP.

PART A. (TO BE FILLED BY THE APPLICANT)

Name of applicant……ID.no…….(attach copy)
Address……..Town……...Mobile no……
Email address……Related member ……..…
Relationship……..Region…..
Location……..Sub- Location……...
Nominee……ID.no……Relation……
Date……..Signature……

PART B. (TO BE FILLED BY EXISTING SHAREHOLDER)

Name ……ID.no……..M.No……
Region……..Address……..Town……
Mobile no……..…Date……..

DECLARATION: (Parent, *Delegate, *Director) I solemnly confirm that……is……
Name……ID.no……..Signature……..

*** Not applicable where the parent has signed.**

PART C. (OFFICIAL USE)

Checked by **(Clerk)**……Signature……Date……

Certified by **(Registry**)……Signature……Date……..

Approved by **(Manager**)……..Signature……Date……