



MEMBERSHIP NO.....

**SIKHULA NABO MEMBERSHIP FORM**

1. NAME IN FULL:.....  
(CAPITAL LETTERS)
  2. OCCUPATION.....GENDER.....
  3. POSTAL ADDRESS: .....
  4. PHYSICAL ADDRESS:.....HOME AREA.....
  5. CHIEF.....INDVUNA.....
  6. MARITAL STATUS: .....DATE OF BIRTH...../...../.....
  7. SCHOOL CLOSE TO HOME.....
  8. STORE CLOSE TO HOME.....
  9. **ID NO:**.....**CELLNO:**.....
  10. **EMAIL:**.....**TEL**.....
  11. NAME OF EMPLOYER:.....
  12. ADDRESS OF EMPLOYER .....
  13. CONDOLENCE OF: E..... AND FUNERAL COVER OF:E.....
  14. **RECRUITER**.....**CONTACT**.....
- I AGREE TO BE ABIDE BY ALL THE LAWS OF THE SOCIETY.**
- NOMINEE:.....RELATIONSHIP.....
- NOMINEE CONTACT.....
- SIGNATURE OF APPLICANT:..... DATE:.....

(PLEASE TICK SAVINGS YOU WOULD LIKE TO MAKE CONTRIBUTIONS TO)

**STATUTORY AND WITHDRAWABLE SAVINGS**

**SHARES WITH A MAXIMUM OF E1 500.00 PAYABLE IN INSTALMENTS**

1. Siyakhula Savings\_\_\_\_\_E100.00
2. School Savings\_\_\_\_\_E50.00
3. Christmas\_\_\_\_\_E50.00

**FOR OFFICE USE ONLY**

1. APPLICATION APPROVED/REJECTED BY MANAGEMENT COMMITTEE: .....
2. DATE OF APPROVAL/REJECTION: .....
3. REASON FOR REJECTION:.....
4. MINUTES NO:..... SECRETARY'S SIGNATURE:.....