

PCEA REGULATED NON-WDT Sacco in existence since 1985

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Our Offices - PCEA General Assembly Offices

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## PCEA REGULATED NON-WDT JUNIOR ACCOUNT OPENING FORM

## Please complete your details in Capital Letters and attach the following documents;

- 1. Copy of Birth certificate/Notification (only if less than 6 months)/ Passport
- 2. Colored passport size photo

Mr. /Mrs. /Miss/Ms.:

**APPLICANT DETAILS:** 

3. Copy of Guardian's ID/Passport (MUST BE A MEMBER OF THE SACCO)

Surna	ame:	First Name	Others	Others					
Gend	nder: Date of Birth B. Ce		B. Certificate	Certificate/Notification Passport No.					
Natio	nality:	Telephone No	Any Disability: <b>Yes/No</b> (If yes Specify)		ecify)				
	e minor hold an account with P indicate the previous account	CELL SHOOL COLORS LES		NO					
	DET	AILS OF THE PARENT							
Surna	name: First Name		Oth	ers					
Meml	Membership No. Email Address		Tel. No.	ID.No					
Relationship to the Minor:									
3. NOMINEE/ BENEFICIARY:									
The person (s) designated to receive benefits in case of demise. If minor indicate "Minor" instead of ID No.									
FULL	Names	ID.No.	Tel. No.	Relationship	% Allocation				
1									
2									
3									

## 4. **DECLARATION**

I the undersigned confirm that the information given above is true to the best of my knowledge. By signing this form, I request to open account in the names of the minor provided and agree to abide by the society by-laws, Terms and conditions of this application. I also consent PCEA Non-Withdrawable Deposit Taking Sacco to use the given information for verification of its authenticity any time such is required from time to time as it pertains to the minor's tenure in the Sacco.

I further take full responsibility to inform the Sacco and provide all the relevant documents for the minor for facilitation of transition from Minor saver to a member of the society.

5. FOR SACCO OFFICIA	L USE ONLY.						
Data captured by:	Date:	Signature:					
Date of Admission to Membership							
Member's registration Number:							
CEO's Signature	Date						
Chairmans Signature	Secretary Signature	e					
Treasurers Signature							

Parent/Guardian Name:......Date..................

Save Regularly, Borrow Wisely, Repay Promptly