

MEMBERSHIP APPLICATION FORM

_____ Date

The Board of Directors
 Barbaza Multi-Purpose Cooperative
 Cubay, Barbaza, Antique

Sirs/Mesdames,

I, _____, a resident of _____, Philippines, hereby apply for membership in Barbaza Multi-Purpose Cooperative. I agree with the purposes and objectives of the Cooperative.

In connection with my membership, I hereby agree to the following terms and conditions:

1. To attend and complete the Pre-Membership Education Seminar (PMES)
2. To pay the membership fee and initial paid up share capital of at least Five Hundred Pesos (Php500.00) and to increase my share capital by paying at least _____ Pesos (Php_____) every month/quarter thereafter.
3. To participate in the planned thrift and savings program by depositing at least Five Hundred Pesos (Php500.00) as my initial savings deposit and at least _____ Pesos (Php_____) every month thereafter.
4. To attend all meetings, conferences or seminars required of me by the Board or by the Management.
5. To comply with the provisions of the Articles of Cooperation, the By-Laws, and policies set by the Board or by the Representative Assembly as well as acts of duly constituted authorities.

I understand and agree to abide with all of the above undertaking. I am aware that the Cooperative thru the Board of Directors may impose sanctions on me for failure on my part to do so.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____, 20____ at _____, Philippines.

APPLICANT'S SIGNATURE

RECOMMENDING APPROVAL: _____
 BRANCH MANAGER

This application for membership was approved/disapproved by the Board of Directors in its meeting held on _____.

EDUCATION COMMITTEE CHAIRPERSON

MEMBER'S SUBSCRIPTION AGREEMENT

The Board of Directors,

In connection with my membership to this Cooperative, I hereby subscribe _____ Common / Preferred Shares valued at One Hundred Pesos (Php100.00) per share or equivalent to _____ Pesos (Php_____), on the following terms and conditions:

1. I agree to pay the initial amount of at least Five Hundred (Php500.00) Pesos upon subscribing and the balance to be paid in installment of _____ Pesos (Php_____), payable in _____ months (not to exceed 24 months). I agree that the unpaid balance of my subscribed capital is my liability to this Cooperative.
2. I agree that I could guarantee/sell a portion of my share capital to any member with prior approval by the Cooperative. I agree that I could make claims to my share capital contribution upon termination of membership without pending obligation and subject to the Cooperative applicable policies, systems and procedures.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____, 20____ at _____, Philippines.

SUBSCRIBER'S SIGNATURE

Subscribed and sworn to before me this _____ day of _____, 20____ at Barbaza, Antique, Philippines, and the subscriber exhibiting CTC No. _____ issued on _____ at _____.

ADMINISTERING OFFICER

MEMBER'S PERSONAL DATA							
First Name:							
Last Name:							
Middle Name:							
Date of Birth:			Place of Birth:			Religion:	
Age:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		Height(cm):		Weight(kg):	
Address:						Zip Code:	
Contact Number(s):				Tax Identification Number:			
Valid/Government Issued IDs		ID Type:			ID Number:		
		ID Type:			ID Number:		
Civil Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widowed							
Educational Attainment	<input type="checkbox"/> Elementary	<input type="checkbox"/> High School	<input type="checkbox"/> Vocational Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> College Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Post Graduate Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> None	
	Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree:	Degree:	Degree:		
	Occupation						
<input type="checkbox"/> Government Employee <input type="checkbox"/> Business Person/Entrepreneur <input type="checkbox"/> Housewife/Househusband <input type="checkbox"/> Private Employee <input type="checkbox"/> Church Servants/Workers <input type="checkbox"/> Youth/Student <input type="checkbox"/> Self-Employed (Practicing Professional) <input type="checkbox"/> Overseas Filipino Worker (OFW) <input type="checkbox"/> Farmer/Fisherfolk <input type="checkbox"/> Self-Employed (Non-Professional) <input type="checkbox"/> Retiree/Pensioner <input type="checkbox"/> Laborer							
If Employed	Status: <input type="checkbox"/> Permanent <input type="checkbox"/> Contractual <input type="checkbox"/> Temporary			If Self - Employed	Business Name:		
	Employer Name:				Business Address:		
	Employer Address:				Business Contact Number:		
	Annual Income:				Annual Income:		
Family Profile							
Household Members' Name	Relationship	Date of Birth	Age	Occupation	Employer	Annual Income	Barbaza MPC Member <input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
Real/Personal Property Owned							
Description		Land Title Number	Lot Number	Location		Lot Area (Sqm)	
1. <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural							
If Agriculture →		<input type="checkbox"/> Rice	<input type="checkbox"/> Corn	<input type="checkbox"/> Sugarcane	<input type="checkbox"/> Coconut	<input type="checkbox"/> Others Specify:	
2. <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural							
If Agriculture →		<input type="checkbox"/> Rice	<input type="checkbox"/> Corn	<input type="checkbox"/> Sugarcane	<input type="checkbox"/> Coconut	<input type="checkbox"/> Others Specify:	
3. Vehicle Owned		<input type="checkbox"/> Car	<input type="checkbox"/> Motorcycle	<input type="checkbox"/> Tricycle	<input type="checkbox"/> Others Specify:		
Beneficiaries							
Beneficiaries Name				Relationship		Date of Birth	
1.							
2.							
3.							
Occupational and Special Skills							
Farming		Livestock		Construction		Processing	
<input type="checkbox"/> Palay <input type="checkbox"/> Corn <input type="checkbox"/> Vegetable <input type="checkbox"/> Others Specify:	<input type="checkbox"/> Fishing	<input type="checkbox"/> Swine <input type="checkbox"/> Poultry <input type="checkbox"/> Others Specify:	<input type="checkbox"/> Masonry <input type="checkbox"/> Carpentry <input type="checkbox"/> Plumbing <input type="checkbox"/> Electrical <input type="checkbox"/> Painting <input type="checkbox"/> Others Specify:	<input type="checkbox"/> Food Processing <input type="checkbox"/> Preservation <input type="checkbox"/> Others Specify:	<input type="checkbox"/> Cosmetology <input type="checkbox"/> Massage Therapist <input type="checkbox"/> Mechanical Repair <input type="checkbox"/> Electronics <input type="checkbox"/> Appliance Repair <input type="checkbox"/> Others Specify:	<input type="checkbox"/> Furniture Making <input type="checkbox"/> Metal Work <input type="checkbox"/> Tailoring <input type="checkbox"/> Others Specify:	Others Specify:
Membership in other Cooperatives							
Name of the Cooperative				Address of the Cooperative			
I declare that this Membership Application Form is accomplished by the undersigned and is true and correct and complete statement of the information contained herein and is done pursuant to the provision of the pertinent laws, rules and regulations of the Republic of the Philippines, I also authorize the Barbaza Multi-Purpose Cooperative to verify/validate the contents stated herein.							
Name of the Member			Signature			Date	
Recruited By:		To be filled by the cooperative staff.					
		Completeness Checked by:			Data Encoded by:		

