

APPLICATION FOR MEMBERSHIP

C.S Forms 4

No. _____ Name (Block Letters) _____

I hereby make application for membership of the

.....

Co-operative Society and I agree to confirm to the Rules thereof, and to the Co-operative Societies Ordinance and Regulations and amendments thereof.

I already belong to the following Co-operative Societies:-

.....

.....

Signature:

Address:

.....

Age: (if 18 or over "Full" will suffice)

Occupation:

Date:

Approved	Date Enrolled	

FORM OF NOMINATION

.....
Co-operative Society, Limited, registered under the Co-operative Societies Ordinance
Chap.326

I,of
.....in the
Country ofa member of
the above-named Co-operative Society hereby nominate the following persons to receive
amounts (or pro-portion of my shares) opposite their names at my decease:-

Names	Address	Amount or proportion
(a)		
(b)		
(c)		
(d)		

Dated thisday of

In the year

.....
Signature

Witnesses:

Signature	Address	Occupation
(1)		
(2)		

Where more than one person is nominated