TRINIDAD CEMENT EMPLOYEES' CREDIT UNION C0-OPERATIVE SOCIETY LIMITED

APPLICATION FORM FOR MEMBERSHIP

1 FULL MEMBERSHIP ○ NON - MEMBERSHIP DEPOSIT ONLY ○

2 DATE :-_____

3 FULL NAME :-_____ BADGE NO:-_____
BLOCK LETTERS

4 HOME ADDRESS:-_____

_____

5 DATE OF BIRTH:-h_____ 6 I.D / D.P NO.:-_____

7 MARITAL STATUS:-_____

8 NAME OF EMPLOYER:-_____

_____

9 EMPLOYER ADDRESS:-_____

_____

10 PERMANT ○ CASUAL ○ TRAINEE/OTHER ○

11 TELE NO:- HOME_____ WORK:-_____ CELL:-_____

12 NAME OF SPOUSE:-_____

13 NAME OF EMPLOYER:-_____

_____

14 CHILD OF WHICH MEMBER:-_____

15 NAME OF RECOMMENDER:-_____

16 SIGNATURE OF RECOMMENDER:-_____

17 SIGNATURE OF APPLICANT:-_____

ACCEPTANCE OF YOUR MEMBERSHIP IS ON THE UNDERSTANDING THAT YOU ABIDE BY THE RULES AND BY LAWS OF CEMCU. FAILURE TO DO SO MAY RESULT IN YOUR EXPLUSION FROM THE ORGANISATION .

FOR OFFICAL USE ONLY

1 APPROVED :- ☐ DEFFERED :- ☐ NOT APPROVED :- ☐

2 STATUS 1 TO 1 ☐ STATUS 1 TO 1.5 ☐

DATE OF MEETING:-_____

PRESIDENT:-_____ SECRETARY:-_____