



Nagrik SA

Nagrik SA Financial Services Co-operative Limited
(Registration no 2013/015732/24)

Registered Address:
22 BILBO STREET, ELDOGLEN EAST,
ELDORAIGNE, CENTURION,
GAUTENG, 0157, SOUTH AFRCIA
PH.: +27 (0)745223323
Email: admin@nagriksa.co.za

Membership Application Form For Business only

(Please fill the form in BLOCK LETTERS only)

To
The Directors,
Nagrik SA Financial Services Co-Operative Limited

Jpeg version of
company logo

Person represent the
company :
(paste your resent
35mm x 45mm sized
color photograph

I, the undersigned representative of _____ with
registration no. _____, would like to apply for the membership of the Nagrik SA
Financial Services Co-Operative Limited.

1. COMPANY Details:

Name of the company: _____

Trading name _____

Registration number _____

Physical address _____

City: _____ Province: _____ Pin Code: _____

Tel: (O) _____ (R) _____ (M) _____

Fax: _____ Email: _____

2.PERSONAL Details of person representing company (this must be supported by a company resolution):

Name: _____
Surname First Name Middle Name

Address: _____

City: _____ Province: _____ Postal Code: _____

Tel: (O) _____ (R) _____ (M) _____

Fax: _____ Email: _____

Sex: Male/Female Color: White/Black/Coloured / Indian Nationality: _____

Date of Birth: _____ Age: _____ years

ID no: _____ IT Reference No: _____



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Occupation: Salaried Business Doctor Engineer
 Lawyer Retired Student Other

Are you suffering from any disability? Yes No

No. of Shares Applied for : _____ @ R 100.00 per share _____
Admin Fee : R 200 per Share _____
Savings Deposit (Minimum R 1000) _____
TOTAL PAYABLE _____

Mailing Address:

All correspondence will be mailed to the address of the applicant. In case you desire the correspondence be sent to address other than that mentioned on page 1, please provide the same hereunder:

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Tel: (O) _____ (R) _____ (M) _____

The following documents must be annexed along with the duly completed Application Form. Please attach a copy of the following:

- Company, CC or trust registration documents;
- Company logo;
- Resolution of board for representative to act on behalf of company
- Address proof of company and individual
- South African ID/Passport; ()
- SARS Registration / IT reference ID; ()
- 2 Passport Sized Recent Colour Photographs; and ()
- A minimum cheque of R1 300.00 - in favour of Nagrik SA Financial Services Co-Operative Limited towards or Proof of remittance to the bank account of the Nagrik SA Financial Services Co-Operative Limited (detail of bank account given at the end of form)

Declaration

I, hereby, declare that the particulars given above are true and correct.

I have read and understood the Constitution of the Nagrik SA Financial Services Co-Operative Ltd & Rules framed thereunder and agree to them. I am bound by the Constitution of the Nagrik SA Financial Services Co-Operative Ltd & Rules framed thereunder.

Name of applicant: _____

Signature of applicant Date: _____ Place: _____



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For Office Purpose:

Received by: _____ Date: _____

Remarks if any: _____

Application for admission to the membership of Nagrik SA FSC Co-Operative Ltd is **Approved** [] / **Rejected** []

Signature of Committee Member / Manager: _____ Date: _____

Banking Details:

Beneficiary Bank : **STANDARD BANK**
Beneficiary Account Name : **Nagrik SA Financial Services Co-Operative Ltd**
Account Number : **013400681**
Branch Name & Clearing Code : **West End (010345)**

- **If deposited by cash R 1350 including cash deposit fee**