



PERSONAL DATA

- A. First Name: _____ Middle Name: _____ Last Name: _____
Alias: _____ Gender: _____ Civil Status: _____
Address: _____ Tel No. /CP No.: _____
Date of Birth: _____ Place of Birth: _____
Citizenship: _____ Religion: _____ SSS/GSIS/TIN No.: _____
Educational Attainment: _____ Occupation: _____ Monthly Income: _____
Employer: _____ Address of Employer: _____
Spouse: _____ CP No.: _____ Date of Birth: _____
Occupation: _____ Employer: _____ Monthly Income: _____

	Beneficiaries	Relationship	Date of Birth	Age
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____

PARENT'S NAME:

Father's Surname <input type="checkbox"/> Living	First Name	Middle Name <input type="checkbox"/> Passed Away	Suffix
Mother's Maiden Name: _____			
Surname <input type="checkbox"/> Living	First Name	Middle Name <input type="checkbox"/> Passed Away	

B. Other Pertinent Information (check or furnish brief data)

- Do you have any business? ☐ Yes ☐ No
- What kind of business are you engaged in? _____
- Place of business? _____
- Business capital
P 5,000 and below
5,001 – 30,000
30,001 – 55,000
55,001 – 75,000
75,001 – up

- C. **HOUSING** ☐ Owned ☐ Leased ☐ Rented _____ Monthly Rental
Residential Lot ☐ Owned ☐ Leased ☐ Rented _____ Monthly Rental

Do you own Appliances/ Furniture/s? Yes No

If yes, please check the items:

<input type="checkbox"/> TV	<input type="checkbox"/> Electric Water Pump
<input type="checkbox"/> Stereo	<input type="checkbox"/> Refrigerator
<input type="checkbox"/> VCD/DVD Player	<input type="checkbox"/> Computer
<input type="checkbox"/> Gas/ Electric Range	<input type="checkbox"/> Telephone
<input type="checkbox"/> Sala Set	
<input type="checkbox"/> Others: _____	

Do you have any vehicles? ☐ Yes ☐ No

Make:

<input type="checkbox"/> Passenger Jeep	_____
<input type="checkbox"/> Tricycle	_____
<input type="checkbox"/> Motorcycle	_____
<input type="checkbox"/> Others	_____

Do you own an agricultural land? ☐ Yes ☐ No

<input type="checkbox"/> Riceland	_____ Market Value
<input type="checkbox"/> Orchard	_____ Market Value
<input type="checkbox"/> Others	_____ Market Value

Other personal properties: _____ Total Value: _____

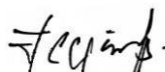
	OTHER CREDITORS	ADDRESS	AMOUNT	COLLATERAL
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____


I hereby certify to the correctness of the above statements.

Date


Signature over Printed Name


Recommended by:


FRANCISCO A. AQUINO JR
Chairman, EDCOM


ARNEL G. DOMINCEL
Chairperson, BOD

Witnessed by:


MYRNA V. VIERNES
Vice-Chairperson, EDCOM


ROMEO J. YARCIA
Secretary, EDC

Noted by:


CORAZON G. ALESNA
General Manager

MEMBERSHIP AND SUBSCRIPTION AGREEMENT

DATE: _____

The Board of Directors

NV Alay Kapwa MPCO

Solano, Nueva Vizcaya

To whom it may concern:

I, _____ a resident of _____ hereby agree to be a member of the NUEVA VIZCAYA ALAY KAPWA MULTI-PURPOSE COOPERATIVE, I have completed the training course prescribed for prospective members and I understand the purpose and objectives of this Cooperative.

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

1. To comply with the provisions of the Articles of Incorporation, the By-Laws and Policies set by the Board of Directors, the General Assembly as well as acts of duly constituted authorities and the failure on my part to do so, the NV Alay Kapwa MPCO, at its option may:
 - a) Fine
 - b) Suspend, or
 - c) Expel me from membership, whereupon all my shareholdings in, shall be answerable for my liabilities to the Cooperative.
2. To attend all meetings, conferences and seminars as required by the Board of Directors and failure on my part to do so, unless previously excused by the Board of Directors, to pay the fine of P 300.00 and to make up for the activity I have missed.
3. To participate in the planned thrift and savings program by:
 - a) Subscribing for at least 150 shares valued at P100 (P 15,000.00) and paying for them either in lump sum or in regular installments. If on installments, to pay at least the value of one share on or before the organizational meeting and the balance upon approval by the Board on my application for membership in regular monthly/weekly/bi-weekly/daily installments of _____ (P _____).
 - b) Contributing to its share capital an amount equivalent to 2% of my monthly income;
 - c) Contributing at least 5% of every loan granted me and at least 50% of the annual interest and patronage refund due me;
 - d) Failure on my part to comply with my financial obligation, unless excused By the Board, shall make me liable for a fine of 2% a month on the amount in default.
4. To pay membership fee of P50.00
5. To comply with the directives of duly constituted authorities as well as decisions of the Board regarding the operating policies of the Cooperative.

NOTE: other conditions may be included depending upon the nature of business of the Cooperative.

The provisions of this agreement, the articles of incorporation and by-laws have been explained to me and understand them and agree to abide with all of them.

In all of the above undertakings, I am aware that the Cooperative may impose sanctions against me or perform any acts necessary to make the sanction(s) effective without going to court.

In witness hereof, I have hereunto affixed my signature/ right hand thumb mark this _____ day of _____, 20____.

Signature or Right hand thumb mark of
Applicant/Member

APPLICATION FOR MEMBERSHIP

I hereby apply for membership in the NUEVA VIZCAYA ALAY KAPWA MULTI-PURPOSE COOPERATIVE; I agree to obey faithfully its rules and regulation as set down in its Articles of Incorporation and By-Laws, the decisions of the general membership meetings and those of the Board of Directors.

I hereby pledge to:

1. Attend and finish the prescribed membership education course;
2. Pay the membership fee of P50.00;
3. Participate in the following savings programs
 - a. Subscribe for at least – shares and pay for them either in lump sum or installments under the terms and conditions prescribed in the membership Agreement/
 - b. Contribute daily/weekly/bi-monthly/monthly at least 2% of my monthly salary into the share capital; and
 - c. Contribute into the share capital at least 50% of the annual interest on capital and patronage refund due me.
4. Comply with the membership and subscription agreement. For your consideration, I do hereby include my Personal Data.

Name: _____ Occupation: _____
Birthplace: _____ Birth Date: _____ Civil Status: _____
Present Address: _____ Tel/CP# _____
Employer or Office: _____ Tel #: _____
Salary: _____ Other Sources of Income: _____
Nearest Relative: _____ Address: _____

DEPENDENTS

RELATIONSHIP

Date & Place

Signature or Right hand Thumb Mark of
Applicant/Member

For Cooperative Official ONLY

This application for membership was approved by the Board of Directors in the meeting held on _____, 20____.

Membership No. _____

Secretary

EARN AND SAVE THE COOPERATIVE WAY!