

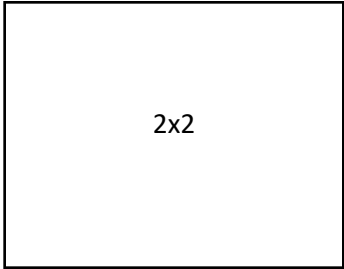


TEKTON ENTRE MULTIPURPOSE COOPERATIVE

CDA Registration Number: 9520-07004119
 Bathan Building Jereza Street, Cor. Burgos Brgy. San Roque, Cebu City
 Telephone Nos. (032) 412-1586/412-1568
 Website: tekton.ph

Date of PMES: _____ Conducted by: _____

Venue: _____



MEMBERSHIP APPLICATION FORM

The BOARD OF DIRECTORS,

I, _____, hereby apply for membership in **Tekton Entre Multipurpose Cooperative**, and agree to faithfully obey its rules and regulations as set down in its by-laws and amendments thereof, or elsewhere, and the decisions of the general membership meetings as well as those of the Board of directors.

PERSONAL INFORMATION				
NAME:	Last Name	First Name	Middle Name	
PRESENT ADDRESS:	House/Bldg./Street No. Code	Barangay	Town/City	Province Zip
	<input type="checkbox"/> Owned	<input type="checkbox"/> Rented/Boarder	<input type="checkbox"/> Living with Parents/Relatives	
PERMANENT ADDRESS:	House/Bldg./Street No. Code	Barangay	Town/City	Province Zip
CONTACT NUMBER:	Mobile Number	Landline No.	Email Address	
DATE OF BIRTH:	PLACE OF BIRTH:	GENDER:		
CIVIL STATUS:	CITIZENSHIP:	RELIGION:		
HIGHEST EDUCATIONAL ATTAINMENT:				
SCHOOL:	YEAR ATTENDED:			
NAME OF SPOUSE (IF MARRIED):	OCCUPATION:			
NO. OF CHILDREN:				
BENEFECIARY:	RELATIONSHIP:			
SSS NO.	TIN:	PHILHEALTH NO.		

SOURCE OF INCOME

If Employed

Company Name	
Address	
Telephone No.	
Position	
Year Started	
Employment Status	
Gross Income Per Month	

If Business

Type of Business	
Trade Name	
Business Address	
Telephone No.	
Year Started	
Capital	
Gross Income Per Month	



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Check Applicable Box:

Ministry/Service in Couples for Christ Global Mission

CFC SFC SOLD HOLD Position: _____

Membership to other Cooperative? _____ Name of Cooperative: _____

I further agree to:

1. Attend and satisfactorily complete the prescribe Cooperative PMES;
2. Pay the Membership Fee of Three Hundred Pesos (Php300.00);
3. Subscribe at least _____ Shares of Stocks for the total of Php_____ at ten (10) per share; pay at least _____ Shares of Stocks for the total of _____;
4. Pay the remaining balance by:
 [] Lump sum, or
 [] Installment at Php_____ per [] semi-monthly [] monthly
5. Contribute into the Share Capital of the annual dividend and patronage refund due me;
6. Patronize the Services of the Cooperative, such as but not limited to Savings and loans, marketing, among others;
7. Participate in all the affairs of the Cooperative, such as the regular and special General Assemblies, Ownership Meetings, among others;
8. Comply with the membership and subscription agreements.

This is for your consideration and approval. Thank you very much.

(Signature of Applicant over Printed Name)

FOR TEKTON EMPC USE ONLY

___Walk-in ___Referral ___Employee

Referred by: _____

Membership Fee Official Receipt (OR) No.: _____ Date: _____

REQUIREMENTS FOR MEMBERSHIP:

1. 2 pieces 2x2 latest photo
2. Business Permit No.: _____ (if available)
3. Employment Certificate (if employed)
4. Copy of one (1) Valid ID (SSS, Driver's License, TIN, etc)

ACTION BY THE BOARD:

- APPROVED
- DISAPPROVED
- Reasons: _____

DEFERRED/REFERRED

Reason/s: _____

BY:

CHAIRPERSON

VICE-CHAIRPERSON

DIRECTORS:

BOARD SECRETARY

CEO, EX-OFFICIO MEMBER