

NASS SACCO COOP SOCIETY

P. O BOX 40200-1020,KISII

E-mail: nasscoop@gmail.com

HOLIDAY SAVINGS FORM

PART A: Terms and Conditions

- ✓ Interest rate to be paid on Savings shall be 5% P.a and shall be determined from time to time.
- ✓ The funds shall be refunded with interest at the end of December of the current year.
- ✓ Interest shall be **forfeited** if withdrawal is done before December 31st or before the 12 months agreed period.
- ✓ **Minimum** contribution per month is **KSH. 1,000 (One thousand shillings only)**
- ✓ Applicant to Attach a copy ID CARD.

PART B: Consent and Application

I.....do hereby agree to join the Holiday savings Plan with Nass Sacco Coop society and instructs my current employer to deduct from my salary KSH..... (Amount in words)and remit to Nass Sacco starting from the month of.....20..... till further notice.

These instructions shall remain in force unless altered by me in concurrence with the society.

My Particulars are as follows:

Employer.....

Station.....

Member No..... Position in Employment

Present Address..... Moibile Number.....

Members Signature.....

Date.....

PART C: For Official Use by the Sacco

Account Application Form and I.D Verified by;

Name.....Designation.....

Signature.....Date.....

Account Opening Approved by:

Name..... Signature.....

Date.....

Account Opening date.....