

## **BEST GEM MULTIPURPOSE COOPERATIVE**

CDA REG NO. 9520-16015774 \* TIN NO. 218-241-584-000 (NON-VAT)

Unit 406 Ansa II Building, 1078 Chino Roces Avenue cor. Montojo St., Brgy. Tejeros, Makati City Tel. No.: (63 2) 822-5354; Fax No.: (63 2) 887-8195; Email: bestgemcoop@yahoo.com

Attach your 1x1 photo w/ white background here

## **APPLICATION FOR REGULAR MEMBERSHIP**

(CONFIDENTIAL)

I, the undersigned, would like to apply for Regular Membership with Best Gem Multipurpose Cooperative and agree to faithfully obey its rules and regulations as set down in its By-Laws and amendments thereof, or policies and the decisions of the General Membership as well as those of the Board of Directors.

	PERSONAL DATA	•	
SLOCPI SLAMCI RC	DHQ ASCP REFERRED BY:		EMP. ID NO.:
NIABAT.	<u> </u>		
NAME:	/F' \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(8.61.414	(81) -1
(Last name)	(First name)	(Middle name)	(Nickname)
MOTHERS MAIDEN NAME:			
	(Last name) (First na	me)	(Middle name)
BIRTHDATE: AGE:	BIRTHPLACE: GENDER: CIVIL ST		, ,
7.62.		Widowed Separated An	
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ADDRESS:			
(No. & Street)	(Subdivision)	(Barangay)	<del></del>
,	,		
(Town)	(City/Province)	(Zip Code)	
(10WII)	(City/Frovince)	(Zip Code)	
RESIDENCE TEL. NO.: EMAIL ADDRESS:			
HIGHEST EDUCATIONAL ATTAINM	<b>MENT</b> : Under Graduate Associate's	s Degree Bachelor's Degr	ee Post Graduate
Associate 3 Degree Dacinelor 3 Degree 103t Graduate			
EMPLOYER NAME: OFFICE ADDRESS:			
EMPLOYER TIN NO.:		.:	
EMPLOYEE TIN:	PAG-IRIG: SSS:	PHILHE	
OCCUPATION:	OCCUPATION STATUS	DATE OF EMPLOY	MENT.
OCCUPATION: OCCUPATION STATUS: DATE OF EMPLOYMENT:			
BANK NAME and ACCOUNT NUM	IBER: RELIGIO	ON/SOCIAL AFFILIATION:	
SPOUSE NAME:			SPOUSE BIRTHDATE:
(Last no	ame) (First name)	(Middle name)	SFOOSE BIRTIDATE.
(Last III		, ,	
	AUTHORITY TO DE		
	horize Sun Life Financial or any of its subsidiaries or		
amount of Pesos	(P	), represe	enting my share capital subscription
and savings, which will be credited to	my account with BEST GEM MPC.		
This authority to deduct will	continue for a minimum of one year unless advised	otherwise. It is understood that m	y share capital subscription account
	nbership unless approved by the Board of Directors.		
The assigned officer of BEST	GEM MPC is also hereby authorized to request the	paymaster of Sun Life Financial or a	ny of its subsidiaries or affiliates, to
collect a membership fee of ONE HUI	NDRED PESOS (P100.00) to be deducted from my sal	ary immediately after my applicatio	n has been approved.
In the event of my resignation	n or separation from my current place of employme	nt and/or membership, I hereby au	thorize my employer or organization
to deliver to BEST GEM MPC, whatev	er amount is due from me up to the extent of my lia	bilities to BEST GEM MPC.	
	DISCLOSURES		
I hereby acknowledge and authorize Best Gem Multipurpose Cooperative:			
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<ol> <li>To submit and disclose reg Information Corporation (</li> </ol>	ularly my basic credit data (as defined under Republ CIC) as well as any update and corrections thereof; a	ind	-
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