**MEMBERSHIP WITHDRAWAL FORM**

**PERSONAL DETAILS**

|  |  |
| --- | --- |
| MEMBER NAME |  |
| PAYROLL NUMBER |  |
| MEMBER NUMBER |  |
| EMPLOYER’S NAME |  |
| ID NUMBER |  |
| MOBILE NUMBER |  |
| EMAIL ADDRESS |  |

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ do hereby request to withdraw my membership from Alarms Regulated NON-WDT Sacco this being my written notice. The reasons for my withdrawal are: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 **Declaration by member**:

**I am fully aware that:**

1. The withdrawal will not be processed until all outstanding loans if any have been cleared and all the loans I have guaranteed cleared or my guarantorship replaced.
2. The share capital investment shall be held by the society as my investment. However, I have the right to sell or transfer the shares to another member. The minimum share capital **is ksh. 30,000.**
3. The withdrawal will be paid after **90 days** of the withdrawal notice.

I undertake to follow up with members I have guaranteed loans to ensure full repayment or replacement of my guarantorship to facilitate the process of membership withdrawal.

**Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OFFICIAL USE ONLY**

**Verified by:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Sign**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Approved by:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Sign**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_