LAW SOCIETY OF KENYA SACCO SOCIETY LTD

(REGULATED N-WDT)

Crawford Business Park,
3rd Flr, Office Suite 23,
State House Rd,
Opp. State House Girls,
Nairobi.

Dropping Zone : Box No.240, Embassy Hse, Basement Flr, Harambee Avn,Nairobi
info@lsksacco.co.ke | www.lsksacco.co.ke

P.O.Box 6740-00100,
Nairobi.
Tel : 020 -514 6300
Cell 0728 788 092

MEMBERSHIP APPLICATION FORM

Fill, print, sign and scan then send together with copies of required documents to info@lsksacco.co.ke. Or contact the Sacco via the address above or your recruiting Agent or Customer Relations Officer (CRO).

APPLICANTS DETAILS

First Name.....Middle Name.....Surname.....

Date of Birth..... Occupation.....
I.D.NO.....

Gender.....Marital Status.....KRA Pin No.....

MEMBERSHIP CATEGORY

(Tick where applicable)	Name of the Firm/Organization	P105 NO *(Attach copy of Practicing Certificate)*
☐ **Advocate/lawyer**		
☐ **Law firm's or advocate's employee**		
☐ **Employee in justice sector institution**		
☐ **Advocate's spouse/child**	**Name of spouse and Sacco membership number**	
Signature Specimen		

DOCUMENTS REQUIRED

A. Advocates

1. Copy of National Identification Card
2. Copy of KRA PIN certificate
3. Copy of LSK current practicing certificate
4. Passport size photograph
5. Dully filled application form

B. Non-Advocates

1. Copy of National Identification Card
2. Copy of KRA PIN certificate
3. Evidence of employment/evidence of affiliation to a recognized body
4. Passport size photograph
5. Dully filled application form.

CONTACT DETAILS

Work Place

Name of Organization ..... Position.....

Building..... Floor..... Street..... Room No.....

Email..... Mobile No..... Landline.....

Postal Address..... Postal Code..... Town.....

Residential/Personal

Residence Estate..... Road..... House No.....

Postal Address.....Postal Code..... Town.....

Email..... Mobile No.....Landline.....

CONSENT TO SHARE PERSONAL DATA

I hereby permit LSK SACCO Ltd to disclose my data and information relating to any transaction, documents, assets, business or affairs outside LSK SACCO Ltd whether such data and or information is obtained after I cease to be a member or during the subsistence of my membership. Share my personal data and/ or information with SASRA and any other relevant bodies/institutions and/or persons.

Full Names..... **I.D No**.....

Signature .....**Date** .....

DECLARATION

I confirm that; The information I have provided herein and the disclosures made are true; and I have received, read and understood the **General Terms and Conditions** of the Sacco and undertake to comply, observe and be bound by the same.

Full Names..... **I.D No**.....

Signature ..... **Date** .....

MEMBERSHIP TERMS AND GENERAL CONDITIONS

- Entrance Fee is **Kshs. 3,000**/=. **Kshs. 1,000** being membership fee and **Kshs. 2,000** to activate account. To pay via MPesa; **Use Pay bill No. 4119695, Account No. your national ID number.**
- Minimum Share capital of **Kshs 30,000** or **1500 shares** each @ **Kshs 20.**
- Minimum Monthly Contributions **Kshs**. **2,000**
- A member is required to contribute for **Six Months** to be eligible to the lending facilities.
- A member is also required to contribute towards the benevolent fund annually.
- Loan applicant is entitled to **three (3)** times of their total savings up to a maximum lending limit of **Kshs**. **40,000,000.00** with a maximum repayment period of 168 months (14 years).
- The rate of interest on loans is **1%** per month on a **reducing balance.**
- Activate your self-care portal account and access your Sacco records at **www.webportal.lsksacco.co.ke**

WITHDRAWAL FROM MEMBERSHIP.

Withdrawal of savings can only be made when a member is ceasing membership with LSK Sacco. A 60 days' notice is required and a member is refunded all her dues and any accrued interest.

PAYMENT OPTIONS:

(a) **Direct deposit**- Money is deposited directly into our account at any co-operative bank branch and the slip forwarded to the office for receipting

(b) **M-pesa**- Money is sent from your M-pesa account to your membership account. You need to quote your member number when sending.

(c) **Direct Debit**- a form is filled where we will be collecting a standard regular amount from your account every month on a specified date.

(d) **Cheque-** a cheque is drawn and sent to our offices for receipting.

(e) **Standing order**- a member places a standing order with their bank to be remitting a certain amount of money every month.

(f) **Check Off**- An arrangement is made with the employer to regularly remit a deduction from your payroll to the Sacco.

FOR OFFICIAL USE ONLY

Data captured by..... Signature..... Date .....

Entrance fee paid on..... Rcpt No..... Reg. Date.....

Checked by ..... CRO Assigned..... Date.....

Members File Opened by..... Signature..... Date.....

Application has been approved and Membership No. Allocated As: **LS-.....**

Membership Approved by..... Signature..... Date.....

RECRUITED BY..... SIGN..... M.NO.....