



NAMA STAFF CMS LTD, MMIA LAGOS

NIGERIAN AIRSPACE MANAGEMENT AGENCY
COOPERATIVE & MULTIPURPOSE SOCIETY, MMIA IKEJA LAGOS

MEMBERSHIP APPLICATION FORM

NAME..... STAFF NO.....

DEPARTMENT.....PHONE NUMBER;.....

RESIDENTIAL ADDRESS;.....

DO YOU BELONG TO ANOTHER COOPERATIVE SOCIETY;.....

IF YES NAME:.....

ARE YOU CURRENTLY REPAYING LOAN IN THE SOCIETY ;.....

IF YES WHEN WILL YOU FINISH THE PAYMENT;.....

WHAT WILL BE YOUR MONTHLY SAVINGS ;.....

NEXT OF KIN;.....

RELATIONSHIP TO APPLICANT;.....

FOR GUARANTORS ONLY (NOTE: *Guarantee only a well trusted person as your savings will be at Stake in case this applicant defrauds the society.*)

(1). FIRST GUARANTOR

NAME;.....

SIGNATURE;.....

PHONE NO.;..... DATE;.....

(2). FIRST GUARANTOR

NAME;.....

SIGNATURE;.....

PHONE NO.;..... DATE;.....

OATH

I HERE BY CERTIFY TO THE BEST OF MY KOWNLEDGE THAT THE INFORMATION GIVEN ABOVE IS CORRECT.

NAME;..... DATE;.....

FOR OFFICIAL USE

APPROVED/NOT APPROVED

.....

CHAIRMAN SIGNATURE