# NATIONAL ASSEMBLY SERVICE COMMISSION STAFF NON-INTEREST COOPERATIVE SOCIETY (NASCS NICS)

NASCS NICS 01

Plot 664 T.O.S. Benson Crescent, Utako, Abuja, Email: nascsnics@gmail.com
Website: https://nascs-nics.e-cooperative.com.ng

## MEMBERSHIP APPLICATION FORM

₦ 2,000

*Affix Passport Photograph*

## SECTION A

### PERSONAL DETAILS

1.Name_____

***Surname*** ***Middle Name*** ***First Name***

2. File Number_____ 3. Date of Birth_____

4. Department_____ 5. Sex_____6. Marital Status_____

7. Home Address_____

_____

8. Mobile Phone No._____9. Email_____

10. Next of Kin_____11. Relationship_____

12. Address and phone No. of Next of Kin_____

_____ Phone No._____

13. Total Monthly Contribution_____

i. Investment Account_____

ii. Savings Account_____

iii. Target/Emergency Account_____

iv. Retirement Savings Account_____

14. Bank Details_____

a) Account Name_____

b) Bank Name_____

c) Account Number_____

d) Branch_____

## SECTION B

### AUTHORITY TO DEDUCT FROM SALARY

Please deduct from monthly salary the sum of ₦_____ to be credited in my account with NASCS NICS, with effect from_____

**N.B two thousand naira (₦ 2,000) for the registration is to be deducted from the first monthly contribution**

## SECTION C

### DECLARATION

I hereby apply for enrolment as a member of the above named Society and promised to abide by the rules and regulations as contained in the Bye Law and as amended from time to time and any other provision as the case may be. Signature_____ Date_____

### FOR OFFICIAL USE

Recommendation_____

Approved/Not Approved_____ Signature_____

Membership No_____ Date Registered_____