

ALL ARTS CLUB INTERNATIONAL INC.
P.O BOX 42100-80100
MOMBASA CITY

MEMBERSHIP APPLICATION FORM

TO: The Management Application Date.....

All Arts International Inc.

I.....do hereby apply for

ALL ARTS INTERNATIONAL INC. membership shares of **Kshs**.....At par value of Kshs.**100.00** and do pledge to comply, observe and be bound by its rules and policies.

PERSONAL DETAILS

Full Names.....

(Surname) (Firstname) (LastName)

Date of Birth.....ID/Passport No.....PIN No.....

Employee ID No.....Sacco Account.....

Nationality.....County.....Division.....

Location.....Sub-Location.....Address:P.O BOX.....Code.....

Mobile No(s).....Email.....

Employment/Occupation Details.....

Employer's Postal Address.....Tel no(s).....

Other Occupation Details.....

Next of Kin.....Relationship.....

Birth Certificate/ID/Passport No (Next of Kin).....

Address (Next of Kin).....Tel.....

ALL ARTS CLUB INTERNATIONAL INC.

DECLARATION

I confirm that:

The information I have provided herein and the disclosures made are true and I hereby pledge to abide by the Policies. General Terms and Conditions of All Arts Club International Inc. and undertake to comply, observe and be bound by the same.

NAME	ID/PASPORT NO.	SPECIMEN SIGNATURE

A) Minor b) Youth c) Adult d) Dependant

FOR OFFICIAL USE ONLY

Membership Type (tick appropriately).....
 PIN NO. /Check No.....Investment Member No.....
 Date of Admission.....

REQUIRERED DOCUMENTS CHECK LIST

- 1. Certified Copy of Original ID/or Passport
- 2. Passport size photo official stamp
- 3.*Fully Completed Membership Application Form.

I confirm that the entire above requirement have been completed correctly and in accordance with All Art Club International Inc. policies and operational procedure and that all attached relevant documents have been certified by me. I therefore confirm acceptance of this member form.

Official.....
 Signature.....Date.....

