

APCAA GREENFIELDS MULTIPURPOSE CO-OPERATIVE SOCIETY LIMITED.

TARGET SAVINGS ACCOUNT OPENING FORM

1. Applicant's Name:
Surname First Name Other Names

2. Contact Address:
.....

3. Contact Phone Numbers (a).....(b)..... (c).....

4. E-mail Address:5. Date of Birth.....

6. Next of Kin. (1)

Address of Next of Kin.....
.....

Phone No.....: E-mail Address:

(2)

Address of Next of Kin.....
.....

Phone No.....:E-mail Address:.....

7: Target Savings Amount N.....TenorMonths

8. Initial Deposit N.....Intended subsequent deposit

I hereby confirm that I have freely and willingly decided to subscribe to operate a TARGET SAVINGS ACCOUNT with APCA GREENFIELDS MULTIPURPOSE CO-OPERATIVE SOCIETY LIMITED, and promise to abide by the terms and conditions binding the product operation. I also confirm that the information provided on this application form are true.

Applicant's Signature..... Date:

For Office Use only:

Application approved by:-

Name.....

SignDate.....Account No.....