

(A Multi state Co-operative Society Under MSCS by Government. Of India) 589/89, Elavumkudiyil Building, Opposite Electricity Board, Pothanicad, Ernakulam, Kerala, PIN - 686671 | info@keralamalabarbank.com | Tel : (+91) 98455 00000

Application Admission as a Member

	anch Name
То	Managing Director Kerala Malabar Bank Co-operative Society No:
Sir	
Ire	quest you to admit me as a member of your society. I furnish the following particulars:
1.	a) Name(s) in full(b) Gender
	Father's / Husband's Name
3.	Age :b) Annual Income Rs
5.	Residential Address (full postal Address with name of village, Taluk and District)
6.	Particulars of properties held, if any
	a) Own Land c) Other Properties
7.	Whether an ex-member of our society if so,
	a) Date of admissionb) Membership Noc) No. of share taken
	d) Date of discontinuance from. membership
	e) Reason for discontinuance from membership
8.	Number of shares required
	a)Amount remitted towards share capital entrance fees
	b) Date of remittance c) Mode of remittance
d)	If by money order, Receipt Number and Name of the post office in which remitted
10.	Name of the nominee:
me	I declare that I am qualified to become a member of the society and I posses all the qualifications prescribed for mbership of the society in the Multi state Co-operative Societies Act & Rules 2002 and the bye laws of the Society.
	I also declare that the above particulars furnished by me are true to the best of my knowledge and belief
	Date
	Signature of Applicant
Nar	ne and Signature of two witnesses with full address
1	
2	