



Attach a passport photo

**MEN'S FORUM AGAINST DOMESTIC VIOLENCE UGANDA COMMUNITY CO-OPERATIVE SAVING & CREDIT SOCIETY LTD**  
Najjanankumbi Entebbe Road Kyesimba House Kampala Uganda.

**APPLICATION FOR MEMBERSHIP**

I, \_\_\_\_\_ hereby apply for membership in the Men's Forum Against Domestic Violence Uganda Community Co-operative Saving & Credit Society Ltd as \_\_\_\_\_ member **(see attached copy of the types of membership and benefits)**  
I agree to faithfully obey/abide by the rules and regulations set forth in its Articles of Incorporation and By-Laws.

**I hereby pledge to:**

1. Attend the prescribed membership orientation/meeting;
2. Pay the membership fee of **50.000Ugx** and annual subscription fee of **20,000Ugx** (or as may be determined by the Executive Committee).
3. Participate in the following savings program:
  - a. Subscribe for \_\_\_\_\_ shares and pay the same either in lump sum or in regular monthly installment, under the terms and conditions prescribed in the Membership Agreement;
  - b. Contributing five percent (5%) of every regular loan granted and 2% of the annual interest on capital (or as may be determined by the Executive Committee).
4. Contributing at least one share capital to the organization of Men's Forum Against Domestic Violence Uganda (MFADVU) each share at 20.000 paid once. (or as may be determined by the Executive Committee).
5. Contribute Shs 10.000 per month for the Welfare bag **(for Ordinary members only)**
6. Buying a societal Uniform at 40.000shs (or as may be determined by the Executive Committee)
7. Comply with the membership subscription agreement. Hereunder is my personal information for your reference and consideration.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
(Date)

**PERSONAL DATA:**

Name: \_\_\_\_\_

Birthplace: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current home Address: Village \_\_\_\_\_ Sub County \_\_\_\_\_

District \_\_\_\_\_

Occupation: \_\_\_\_\_

Company: \_\_\_\_\_ Position: \_\_\_\_\_

Office Address: \_\_\_\_\_

Your Personal Phone No. \_\_\_\_\_

Email Address (if applicable) \_\_\_\_\_

Name of your Father: \_\_\_\_\_

Name of your Mother: \_\_\_\_\_

Place of residence Village \_\_\_\_\_

Sub county \_\_\_\_\_ District \_\_\_\_\_

Name of Spouse (if married): \_\_\_\_\_ Occupation: \_\_\_\_\_

Your Next of kin \_\_\_\_\_ Relationship \_\_\_\_\_

Present Address \_\_\_\_\_ Phone No. \_\_\_\_\_

Name/ Age of Children/ 1. \_\_\_\_\_

Beneficiary/ies 2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_

10. \_\_\_\_\_

## MEMBERSHIP SUBSCRIPTION AGREEMENT

The undersigned hereby offers to subscribe for the capital share as approved by the Executive Committee of the Men's Forum Against Domestic Violence Uganda Community Co-operative Savings & Credit Society Ltd set forth in this Subscription Agreement.

By execution of this Subscription Agreement, the undersigned hereby acknowledges that the undersigned understands and agrees to comply with its obligations as follows;

1. To comply with the provisions of the Articles of Incorporation, the By-laws, the policies set by the Committee, the General Assembly, as well as the acts/directives or duly constituted authorities, and that, failure on my part to do so, the Men's Forum Against Domestic Violence Community Cooperative Savings & Credit Society Ltd at its option, may:

- a) Fine,
- b) Suspend, or
- c) Expel me from membership, where upon my liabilities to the Men's Forum Against Domestic Violence Uganda Community Co-Operative Savings & Credit Society Ltd (if any) shall be chargeable against my shareholdings.

2. To attend all meetings, conferences and seminars as required by the Executive Committee and failure on my part to do so, unless previously excused by the Committee, to pay the fine of **10.000Ugx** or as may be determined by the Executive Committee.

3. To pay the membership fee of **Ugx 50.000shs** (or as may be determined by the Executive Committee) and an annual subscription fee of **Ugx20.000** and in the event of failure to pay annual subscription by the end of the year, such an amount shall be recovered from the undersigned's annual shareholdings.

4. To participate in the thrift and savings program of the cooperative by:

- a) Subscribing for the minimum of five (5) shares valued at **(20.000Ugx shs)** and paying for the subscribed shares either in lump sum or in regular installment, to pay at least the value of one share on or before the Societal meeting and the balance upon approval by the Executive Committee of my application for membership, in regular monthly installment of not beyond two months.
- b) Contributing five percent (20%) of every regular loan granted for non-regular savers and Two (15%) for regular savers (or as may be determined by the Executive Committee).
- c) Contributing at least one share capital to the organization of Men's Forum Against Domestic Violence Uganda (MFADVU).
- d) Contribute Shs 10.000 per month for welfare bag **(for Ordinary members only)**

5. Dividend made by the cooperative in a given financial year shall be re-distributed to all shareholders depending on the performance of the cooperative at a rate not exceeding 10%.

6. Shareholders shall only be allowed to withdraw part of their savings after making one year in the cooperative.

7. The minimum balance for any savings account shall be **Ugx 20,000**

8. For members who subscribe to the Welfare bag, the cooperative shall only be liable to support you in case of;

- i. Sorrowful moments such as loss of a close biological relative namely; Father, Mother, Child, Wife or Husband.
- ii. Joyful moments such as weddings and introductions for; Father, Mother, biological child, wife or husband.

In all these cases, the cooperative shall contribute **100,000 shillings** to the member and shall provide transport for members to attend.

If a member needs a financial assistance of any other kind, he/she shall officially write to the Chairperson, who shall determine in liaison with the Executive Committee whether to extend assistance to the member concerned or not.

By affixing my signature below, I am fully aware and understood the provisions of this Agreement, the Articles of Incorporation and By-laws, and agree to abide by the above-mentioned conditions as well as the imposition of sanctions against me in case of commission of acts not in accordance or against the said provisions.

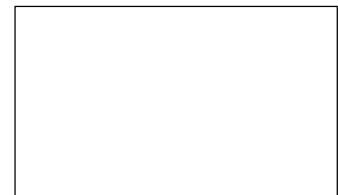
In witness hereof, I have hereunto affixed my signature and right-hand thumb mark this day of \_\_\_\_\_  
Month \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

Accomplished: \_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Place)



Right Thumb Mark

**N.B Please attach a copy of your National Id. Or Passport**

**For official use only**

This is to certify that this application for membership was Approved / Disapproved by the Executive Committee in its meeting on \_\_\_\_\_, 20 \_\_\_\_\_

Membership No. \_\_\_\_\_

\_\_\_\_\_  
**Chairperson**

\_\_\_\_\_  
**Secretary**