



SPOT CASH SUBSCRIPTION FORM

PLEASE COMPLETE DETAILS IN CAPITAL LETTERS

Branch: _____ Date: _____

Full Names _____

Gender _____

Applicant's ID No. _____

Account Number: _____

Mobile Number

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Please tick the item you want to subscribe

SPOT CASH SUBSCRIPTION		SMS ALERTS	
<input type="checkbox"/>	Salary Requests	<input type="checkbox"/>	Salary Alerts
<input type="checkbox"/>	Mini-statement	<input type="checkbox"/>	Cheque Maturity
<input type="checkbox"/>	Savings Balance	<input type="checkbox"/>	ATM Debit
<input type="checkbox"/>	Bosa Member Balance	<input type="checkbox"/>	Guarantor ship Alerts

Declaration by the Applicant

I/We authorise the Qwetu Sacco to SIGN UP for Sport Cash and warrant that the information given above is the true and complete. I/We authorize you to make any enquiries necessary in connection with the application. I/We accept and agree to be bound by the conditions of use, detailed overleaf (as amended from time to time). I/We agree that I am/will be liable for all charges incurred through the use of this service. I/We understand that my/our application can be declined by Qwetu Sacco without giving reasons to the extent permitted by law.

Applicants Signature (s): _____ Date _____

For official use

Sacco: Verified by: _____ Approved by: _____

Date: _____ Sacco Stamp _____