TABUK MULTIPURPOSE COOPERATIVE (TAMPCO)

MAIN OFFICE 36, Padre Burgos St., Dagupan Centro, Tabuk City, Kalinga 2022-v1 **MEMBERSHIP APPLICATION FORM** Savings Deposit ATM Card A. TAMPCO ACCOUNT NO: Time Deposit INITIAL DEPOSIT: For Update DATE: For Regular Member **B. APPLICANT INFORMATION** Last Name **First Name Middle Name** Ext. PRESENT ADDRESS **OTHER ADDRESS** Block/Lot Block/Lot Purok/ Sitio Purok/ Sitio Barangay Barangay Municipality/City Municipality/City Province Province **Birth Date** Place of Birth: Sex: **CIVIL STATUS: Contact Number** E-mail TAX IDENTIFICATION NUMBER (TIN): AGE: C. EMPLOYMENT and SOURCES OF INCOME **Current Occupation:** Other Sources of Income 1 Office/Business Name: 2 Office/Business Address: 3 ANNUAL INCOME D. SINGLE/ MINOR APPLICANT First Name Middle Name Last Name & Ext Deceased? TAMPCO Acct. No Mother's Maiden Name Father's Name **Present Address** E. PERSON TO CONTACT IN CASE OF EMERGENCY Name (first, middle, last name): Contact Number: **Present Address:** F. FOR MARRIED APPLICANT Name of Spouse: TAMPCO Account No. (if any) Birth Date: Contact Number: E-mail: Occupation: Office/Business Address: Office/Business Name: G. NAME OF CHILDREN (if Any)/ (For single, write the name of sibling/s) Use Separate sheet if necessary First Name Mid. Name Last Name **Birth Date First Name** Mid. Name Last Name **Birth Date** H. MEMBERSHIP TO OTHER COOPERATIVE/S Use Separate sheet if necessor Name of Cooperative Positions held Address Member since **Reason for Joining TAMPCO:** SKETCH LOCATION OF APPLICANT'S HOME ADDRESS 2 x 2 RECENT **PICTURE SIGNATURE**

LANDMARK:

Certification

single/married/widow/wid			rtifying person), of legal age,
MULTIPURPOSE COOPERAT	ΓΙVE (TAMPCO) since	hereby	and a member of TABUK / certifies:
Inat I personally know			(name of Applicant), a resident of and having a good moral
character and has not com	mitted any immoral acts, an	ny crime, or whatsoeve	er that violates the laws of the land.
Given thisday of	year	at	, province of
			1 . Printed Name and Signature of CERTIFYING PERSON TAMPCO ACCT NO:
fill-out iti kaaruba nga miem	bro iti TAMPCO nga amamu y	Conforme /u)	
	2.		
	Printed name and signature TAMPCO	of any NEIGHBOR who DACCT NO:	is a member of TAMPCO
	3		
	Printed name and signature	of any BARANGAY OFF	ICIAL (Kagawad wenu Kapitan)
under as well as its policie WAIVER: With due considera	s and decisions created/appr tion, I am authorizing the ma amount needed to pay my m	oved by the GENERAL A nagement of TAMPCO t embership fee and othe	its BY-LAWS and REGULATIONS promulgated there SSEMBLY and by the BOARD of DIRECTORS. o automatically transfer my savings/time or fees including the minimum amount required
	Printed Name and Sig	gnature of Applicant	DATE
BE FILLED OUT BY TAMPCO EMPLOY			
gistration Fee:	Received by:	Verified By:	EDCOM REP:
ference No:	Date Received:	Date:	PMES Date:
ecked by:	Remarks:	Remarks	Remarks:
QUIREMENTS NEEDED One (1) Photocopy of any govern 2x2 ID picture (2 pieces) One (1) photocopy of any of the	following:		copy of accomplished MEMBERSHIP APPLICATION FORM
a. VOTER's ID - naka rehistro	iti address nga ada ijay account a rehistro iti address nga ada ijay a	ccount address	FOR MINOR APPLICANTS 1. Two (2) photocopies of Birth Certificate. 2. One(1) Photocopy of accomplished

MEMBERSHIP APPLICATION FORM.

c. Electric Bill - naka nagan kanyam or asawa d. Water Bill - naka nagan kanyam or asawa