Unified North Credit Cooperative (UNoCreCo)

Main Office: No. 75 Lourdes Subdivision (Middle Rd), Lourdes Proper, Baguio City, CAR
Satellite Office: 4/F Rooftop, No. 38-L, Maharlika Livelihood Complex, cor. Abanao and Magsaysay Avenue, Baguio City
www.unocreco.com unifiednorthcc@gmail.com CDA Registration No. 9520-101400038912

Application for Membership

Please write clearly in capital letters. Bring this form and your requirements to either office.

PERSONAL INFORMATION

Name: Last Name	First Name	Middle Name	Title

Date of Birth (MM/DD/YYYY)	**Place of Birth**	**Nationality**	**Gender**
Civil Status	**Name of Spouse**	**No. of Dependents**	**TIN / SSS / GSIS No.**
Current Home Address (No., Street, Subdivision, Barangay, City/Town, Province, ZIP Code)			
Residing There Since (MM/YYYY)	**Telephone Number**	**Mobile Number**	**Email Address**
Permanent Address (No., Street, Subdivision, Barangay, City/Town, Province, ZIP Code)			
Residence Status: ☐ Owned ☐ Rented ☐ Living With Relatives ☐ Others: _____			
Profession / Occupation		**Name of Employer or Business**	
Business or Office Address (No., Street, Subdivision, Barangay, City/Town, Province, ZIP Code)			
Source of Funds: ☐ Salary ☐ Allowance ☐ Business Income ☐ Remittances ☐ Retirement / Pension			

BENEFICIARIES

Name	Date of Birth (MM/DD/YYYY)	Relationship
1.		
2.		
3.		
4.		

CERTIFICATION AND CONSENT

By signing below, I certify that the information I have given is true and correct. I authorize Unified North Credit Cooperative (UNoCreCo) to verify it and to keep my records up to date. I consent to UNoCreCo collecting, using and keeping my personal information for my membership, savings, loans, benefits and the reports required by law, in line with the Data Privacy Act of 2012 (RA 10173) and its implementing rules. I may ask to see or correct my information at either office.

_____ _____

Signature Over Printed Name Date

FOR OFFICE USE ONLY

Membership Type: ☐ Regular ☐ Associate Recruited By: _____ Membership No.: _____

Validated By (Education Committee): _____ Date: _____

Approved By (Board of Directors): _____ Date: _____

Requirements: birth or marriage certificate (photocopy), two 2x2 ID pictures, barangay clearance, photocopies of 2 valid government IDs; ages 70 to 75, a medical certificate.