

CHAI SACCO SOCIETY LIMITED

Head Office: Chai House, Ground floor, Koinange Street P.O Box 278-00200, City Square Nairobi Kenya

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MEMBER DETAILS UPDATE FORM

PERSONAL DETAILS	BRANCH:		
	OLD DETAILS		CURRENT DETAILS
FULL NAME			
ID NO.			
MEMBER NUMBER			
EMPLOYERS NAME			
PAYROLL NO.			
POSTAL ADDRESS			
MOBILE NO.			
EMAIL ADDRESS			
Name of Child:			Gender:
Name of Child: Date of Birth:		Gender: Birth Cert. No.	
Date of Birtin.		Birtir Cert. 1	10.
Name of Child:		Gender:	
Date of Birth:		Birth Cert. No.	
Name of Child:		Gender:	
Date of Birth:		Birth Cert. No.	
	ven above is true and I h	nereby agree to	have my details amended to the above provided det
antil instructed otherwise.			
Signature		Date	
NOTE:			

- 1. Members who wish to update their photo to attach a recent passport size photograph.
- 2. Members who have changed their names should attach the affidavit of name change.

Version B Revision 01

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