BCC M P C KEEP MOVING!	BARANGKA CREDIT COOPERATIVE A Primary Multi-Purpose Cooperative No. 170 General Julian Cruz St., Barangka, Marikina City 8475-0044   8997-3051   8941-5244	Membership Status:  New Member  Current/Old Member	SUBSCRIPT	SHARE CAPITAL ION AGREEMENT -034 / Rev. 10/16/2020)				
Last Name	First Name	Middle Name	Date Applied:	Application No.:				
Total Amount Subscribed:	Term of Subscription:  Term of Payment:  Weekly Semi-Monthly Monthly Others:	Mode of Payment:  Over the Counter (OTC Post Dated Checks Debit from ATM/Salary Debit from regular savi		Last Payment Date:				
within the prescril  1.2. Regular members minimum of ₱14,0 the capacity of the		pership or on a monthly in 200.00 and above must covisor is equivalent to \$\mathbb{P}\$14, antitled to receive a 5% incorribing members shall be card or savings account vot cash basis shall be entiticed out with BCC upon further count with BCC upon further capital or vice vot BCC in the computation of the BCC Membership Policy scription on share capital.	enstallment.  Institution of subscribe acceptive reward based or eafter the conduct of Arvith BCC.  Itled to receive 10% inception of subscriberation of subscriberat	dditional common shares. A iption may vary according to in his/her paid-up share innual General Assembly entive reward. The said reward of the year.				
	r month shall be charged on the amount of share capital	subscription in default.						
I, whose specimen signature below, certify that the information disclosed in this Agreement is true and correct, and the provisions indicated herein has been explained to me and clearly understood for compliance.								

Printed Name & Signature of Co-Owner

BARANGKA CREDIT COOPERATIVE MIGS ATM SAVINGS APPLICATION FORM Date								
	MEMBER INFOR	PMATION						
NAME (Last Name, First Name, Middle Na			SHORT NAME					
ADDRESS			TELEPHONE N	IUMBER				
BIRTHDAY	YOUR MOTHERS'S FULL MA	AIDEN NAME						
	ACCOUNT INFO	RMATION						
NAME TO APPEAR ON THE ATM CARD (			MEMBER SIGN	IATURE				
TYPE OF CARD APPLIED FOR		<b>BCC USE ONLY</b>						
☐ New Card ☐ Replacement Card ☐ Lost Card		CARD NUMBER						
O Wear & Tear valid until ☐ Forgotten Pin								
ATM ACCOUNT NO.								
				For	rm No. MI-013			
	BCC USE O	NLY						
Processed by	Signature Verified by		Approved by					
	Detach He	re						
ATM CARD RELEASE SLIP								
Name		Application D	ate					
Card Number		Release Date						
Member's Signature over Print	Member's Signature over Printed Name  Coop Officer's Signature over Printed Name							



## **BARANGKA CREDIT COOPERATIVE**

A Primary Multi-Purpose Cooperative





2x2 ID Picture

Membership Code/ ID No.	:		
Date of Membership	:		
For		The Board of Directors	

I hereby submit the following information in connection	ction with my application	for member	ership/ ov	wnership.									
I. PERSONAL INFORMATION													
LAST NAME GIVEN NAME						MIDDLE NAME							
PRESENT ADDRESS						LENGTH OF	RESIDE	NCY	TELEPHO	ONE/ N	OBILE	NO.	
Muselan Johan	Subdivision / Barangay		Lose / Beerin			Year	Month						
Number Street HOME OWNERSHIP	Subdivision / Barangay		City / Provin	nce		Year Month     NICKNAME/ ALYAS							
☐ Owned ☐ Rented ☐ Mortgaged ☐ Free use - C	Owned by:												
PERMANENT ADDRESS						PROVINCIAL ADDRESS							
Number Street	Subdivision / Barangay		City / Provir	nce									
BIRTH DATE (Month/Day/Year)	AGE PLACE OF BI	RTH				GENDER			CITIZENSHIP				
						Male	Fema	le ———					
EDUCATIONAL ATTAINMENT	CIVIL STATUS	Morri	ad			MOTHER'S MAIDEN NAME							
Post Graduate; High School Graduate	Single  Legally Separated	Marri Anniv	eu /ersary Dat	te:	-				T === : ===				
College Graduate Elementary Graduate  Vocational Degree Atbp.	Widow/Widower					TIN No.			SSS/ GS	IS No.			
AFFILIATION/ CIVIC ORGANIZATION MEMBERSHIP	_												
Type: Position:	Name of Organization:					PERSON WIT	ГН ЅРЕС	IAL NEE	DS (PSN):		Yes	☐ No	,
II. SOURCE/S OF INCOME													
MAIN INCOME: DATE STARTED	COMPANY/ BUSINES:	SNAME							мемве	R'S OT	HER IN	СОМЕ	
Sustento/Pension													
	COMPLETE COMPAN	Y/ BUSINE	SS ADDR	ESS									
Business POSITION/ NATURE OF BUSINESS													
Salary	VEADS IN COMPANY	, [	□ st/	ATUS					MONTHL	LY INC	OME		
Others: BUSINESS/ PENSION Regular						Others							
MONTHLY INCOME - PS.	TELEPHONE/ CELLPH	HONE NO.	OF COMP	ANY/ BUS	INESS								
III. CHARACTER REFERENCES (not related	to you)												
NAME:						TELEPHONE/ CELLPHONE NO.							
NAME:						TELEPHON	IE/ CEL	LPHONE	E NO.				
IV. LIFE SHARE PROTECTION PLAN (LSPP)													
1. BENEFICIARY/IES													
PRIMARY NAME (Last Name, First Na	ame, Middle Name)	AGE		RELATIO	NSHIP	G	SENDER	/STATUS		СО	NTACT	NO.	
1.													
2.													
3.													
SECONDARY w/ Proof of Beneficiary  NAME (Last Name, First	t Name, Middle Name)	AGE		RELATIO	NSHIP	G	SENDER	/STATUS		со	NTACT	NO.	
1.													
2.													
3.													
2. MEMBER'S DECLARATION OF MEDICA HEALTH DECLARATIO			YES	NO	DATE	OF SICKNE	ee		MEDICAL	TDE A	TMENT		
Are you in good health?				NU	DAIE	. OI SIURNE			MEDICAL	. INEA	WENI		_
Had an infectious or critical illness (HIV or AIDS, Cancer	and others.)												
Please write major illness (if there's any)	·		1	<u> </u>									

Pleas	se recognize	in the payment of the transaction of	on my account the following signatures.	res:		
						_
2.			4.			
V. N. s BC	MEMBERSHI CC Member, I he 1. To prove t Number_ 2. To pay the memberst 3. To comply of duty co 3.1. Fi	P PLEDGE, TERMS AND CONDITION  Treby pledge to agree and comply with the shat I have attended, completed and finished the membership fee of P100.00 upon application in the provisions of the Articles of Coopenstituted Authorities, and in case of failure the, suspend, terminate or expel me from	following terms and conditions of my member of the prescribed Pre-Membership Education tion, the required minimum share capital su- ration, By-Laws, policies, and regulations see on my part to do so, the BCC Board of Dire membership, where upon my shareholding	ership with the Barangka Credit Coop n Seminar (PMES) on this day of abscription within the prescribed 24-n to the Board of Directors, the Generactors or its designated representative shall be answerable for my loans as	month period, and other to al Manager or the Chief E l/s, or the Kilusang Bayar s co-maker and other lia	Executive Officer, as well as ac n or Court, at its options may: abilities to BCC. This is witho
	4. To certify to Plan (LSP violation of	he truthfulness of all the information prescr P). I further certify that I have read, unders n any part or whole policy shall be enough	s for collection of all loans and obligations to ibed in this membership application form inc tood and have been appraised, as well as m ground for the non-payment or forfeiture of uild-Up (CBU) program of the cooperative a	luding the information provided under by beneficiaries and family members on my LSPP benefits without any further	r my Beneficiary/ies Infor of the LSPP, to which I/w r notice.	mation for Life Share Protectic e adhere and strictly abide. Ar
	Section 68 5.1. To 5.2. Up at	subscribe for a minimum of 140 shares va con completion or full payment of the requ least P for my Share Capita rrnings/income;	llued at ₱100.00 per share, and pay in lump lired minimum 140 shares, to continue sub l account and at least ₱ for m will avail for my CBU. For this purpose, I her	sum or installment within 24 months scribing, adding, contributing, depos y Regular Savings account, to which	from the approval of this siting or paying on a dail n may be deducted or co	s membership application; ly/weekly/semi-monthly/month llected from my monthly salar
6	to 5.4. To	my Share Capital account; contribute at least 50% of the annual inter	est on capital and patronage refund due to accility from BCC is a privilege and not a ma	me, and add to my Share Capital acc	count;	
7	and ensur 7. To agree a	e to pay my due religiously; and comply the terms and conditions applie	d on membership withdrawal/resignation/temember may, for any valid reason, withdraw	mination as prescribed under the foll	lowing:	,
	to cc 7.2. BG he 7.	the Board of Directors. However, no memboperative."; CC Membership Policy, Article II, Section 5, rein: 2.1. To secure, fill-up and submit mem	per shall be allowed to withdraw or terminate to wit: "A member who opts to withdraw/res bership withdrawal/resignation/termination a	e his/her membership during any peri- ign/terminate his/her membership wit und clearance form;	od in which he/she has a	any pending obligations with th
	7. 7.	<ul><li>2.3. To undergo counseling and re-orie</li><li>2.4. To pay the required withdrawal/retermination;</li></ul>	apital Certificate, passbooks, MIGS ATM carentation from the Board of Directors or any designation/termination fee of ₱1,000.00 to	f its authorized representatives; be automatically deducted from case	sh proceeds upon mem	
			ement of disputes under BCC By-Laws, Arti	cie XI belore going to Cooperative De	evelopment Authority (Ct	DA) or courts.
auth	orize and give nee, retain, and o	lispose my personal information and other	(BCC), a primary multi-purpose cooperative sensitive personal information contained in Data Privacy Act 2012, and its implementing	my membership record form and any		
•	authorities To establis To manag To conduc	such as the Cooperative Development Aush, confirm, review or update my record; e and process my account and/or services	assessment, product development and aud	BIR), and third parties like BCC accre		
	erstand that any	·	ble laws, rules and regulations.  BCC will only collect my Personal Information of the collection, e-channels - BCC business online	•	•	e means, i.e. in person at BC
unde nd re agre ny lia	erstand that this egulations for m e to hold BCC a ability arising fro	authorization/consent shall continue to be embership account closure, and the period	in effect throughout the duration of my mem set until destruction and/or disposal of my r y obtain, or with whom it may disclose or ve	bership with BCC and/or until expirat ecords, unless earlier withdrawn in w	ion of the records retenti riting.	·
VII.	CONFORMI					
ledge	e, terms & cond		s true and correct to the best of my knowled ation willfully withheld or intentionally made	=		
	eation. ness whereof, I	nave here unto affixed my signature and rig	ght hand thumb mark this day o	of,,		
-		Printed Name	Signati	ure _	PB No.	Right Thumb Mark
-		Witnessed & Received by:	Approve	d by:		
[	Action of					
	the Board	The application of membership w	as approved/ disapproved by the Board	of Directors in its meeting held on		
		BCC MEMBER CODE.:				