



# THE ESTATES STAFFS' PROVIDENT SOCIETY

## APPLICATION FOR MEMBERSHIP

Office use  
Membership No: .....

**PARTICULARS OF APPLICANT**

1. Name in full      

Mr	Ms
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 .      : .....
2. Name with initials      : .....
3. Date of Birth      : .....
4. Designation      : .....
5. National identity card number      : .....
6. Personal Address      : .....
7. Civil Status      : .....
8. Telephone no      : .....
9. E mail address      : .....
10. Monthly consolidated earnings      : Rs.....
11. Date of commencement of employment      : .....

**PARTICULARS OF EMPLOYER**

12. Name & Designation      : .....
13. Address      : .....
14. Email address official      : .....

**GENERAL**

15. Have you been a Member before      : .....
16. If yes Membership No      : .....
17. Provident fund withdrawal date      : .....

**DECLARATION BY EMPLOYEE**

- I declare that the particulars stated above are correct and I hereby apply to be admitted as a member of the Estate Staffs' Provident Society and agree to be bound by the rules now in force and any alteration thereof by rescission, amendment or addition which may be duly adopted.
- I further agree that in the event of premia on any insurance policy which I hold being paid through the Estate Staffs' Provident Society, all cash dividends, cash bonuses, cash rebates, proceeds on maturity and any funds arising from or payable under such insurance shall be paid into my account with the Society.

Date .....

Signature of Applicant

**DECLARATION OF EMPLOYER**

I certify to the correctness of the statements contained in the Application, and I agree to pay on behalf of this Applicant the share of my contribution.

Date: .....

Signature of Employer  
(Official Rubber Stamp)

Note:  
Please notify the Secretary of any change of address.  
Evidence of age Birth certificate or certified copy or the National Identity Card (both sides) Passport