



PRIVATE SECURITY INDUSTRY PERSONNEL EMPLOYEES AND GUARDS CREDIT COOPERATIVE

Ground Floor, Philippine Korea Friendship Center, Bayani Road, Fort Bonifacio, Western Bicutan, Taguig City 1630 MMLa.
Tel Nos. 506-8139; 0917-1344871; 0933-5199379; 24_7_memberservices@psipagcc.ph; <http://www.psipagcc.ph>

MEMBERSHIP AGREEMENT

I, _____ hereby apply for membership in the PSIPAG Credit Co-operative as regular member. I AGREE to faithfully obey/abide by the rules and regulations set forth in R.A.9520, those prescribed by the CDA, and of PSIPAGCCo's Articles of Cooperation and By-Laws; and those promulgated by its Board of Directors and General Assembly.

I hereby **PLEDGE** to:

Attend and finish the prescribed **pre-membership education seminar (PMES)**.

1. Pay the **membership fee of Php1,000.00** (or as may be determined by the BOD).
2. Participate in the following Capital Build-up and savings program:
 - a. **Subscribe for at least 40 shares and pay the required minimum paid-up share-capital either in lump sum or in regular monthly instalment**, under the terms and conditions prescribed in the Membership Agreement;
 - b. Contribute a minimum of **Php 500.00 or Php 250.00 every payday (Php 1,000.00/500 plus 50.00 for the insurance per month, whichever is applicable, or as may be determined by the BOD)** as Capital-Build up, share capital, or Savings;
 - c. Contribute into the share capital **at least 5% of my annual interest on capital, AND patronage refund** (or as may be determined and declared by the BOD on Dividends).
3. Comply with the membership subscription agreement and rules on membership. Hereunder is my personal information for your reference and consideration.

***Bi- monthly Minimum Contribution for Security Guards ONLY is P250.00 plus P50.00 for the insurance every payday total of P300.00**

Signature over Printed Name

Date Signed: _____

Place Signed: _____

PERSONAL DATA:

Name: _____ Civil Status: _____ Religion: _____

Birthplace: _____ Date of Birth: _____

Present Address: _____

Occupation: _____ Gross Salary (Monthly) Php: _____

Agency/Office: _____ Position & Assignment: _____

Office Address: _____ Office Tel No. _____

Name of Father: _____ Name of Mother: _____

Name of Spouse (if married) : _____ Occupation: _____

Name/ Age of Children/ 1. _____

2. _____

3. _____

Note: Spouse & children are automatic **beneficiaries** if Married. If single, pls indicate below name of relative as beneficiary:

Name: _____ Relation: _____

Security License No. _____ Exp. _____ Yrs. in Security Profession _____ in Agency _____

Mobile No. _____ Agency GM/Paymaster _____

This is to certify that this application for membership was approved / disapproved by the Board of Directors in its meeting on _____, 20 _____

Secretary

Membership No. _____



PSIPAGCCo MEMBERSHIP SUBSCRIPTION AGREEMENT

Ground Floor, Philippine Korea Friendship Center, Bayani Road, Fort Bonifacio, Western Bicutan, Taguig City 1630 MMla.
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The undersigned hereby offers to subscribe for the capital share as approved by the BOD of the PSIPAGCC set forth in this Subscription Agreement.

By execution of this Subscription Agreement, the undersigned hereby acknowledges that the undersigned **understands and agrees to comply with its obligations** as follows:

1. To comply with the provisions of the Articles of Cooperation, the By-laws, the policies set by the Board, the General Assembly, as well as the acts/directives of duly constituted authorities, and that, failure on my part to do so, the PSIPAG Credit Cooperative at its option, may:
 - a) Fine,
 - b) Suspend, or
 - c) Expel me from membership, whereupon my liabilities to the PSIPAGCCo (if any) shall be chargeable against my shareholdings.
2. To attend all meetings, conferences and seminars as required by the Board of Directors and failure on my part to do so, unless previously excused by the Board, to pay the fine of Php. _____ or as may be determined by the BOD.
3. To pay the annual membership fee of Php. 1,000.00 (or as may be determined by the BOD).
4. To participate in the thrift and savings program of the cooperative by:
 - a) Subscribing for at least a total of **40 shares valued at 1,000 per share, equivalent to (Php40,000.00)** and paying for the subscribed shares either in lump sum or in regular installments. The initial required subscription paid-up value of Ten (10) Shares upon approval by the Board of my application for membership, the value for at least four (4) shares thereof will be paid in cash or in a 3-month installment; and to pay the value for the six (6) shares within six (6) months from membership. The Subscription balance of thirty (30) shares will be paid in regular monthly installments of (Note: minimum of P500.00/250.00 plus P50.00 for the insurance every payroll or per 15 days) _____ (Php. _____); installment period not to exceed two and a half (2 1/2) years after full-payment of the initial subscription requirement of ten (10) shares
 - b) Contributing to the share capital a minimum of Php. 500.00 (or as may be determined by the BOD); and
 - c) Contributing at least two percent (2%) of every regular loan granted and at least 5 % of the annual interest on capital (or as may be determined by the BOD) and the patronage refund due me.
5. To ensure that my signed Automatic [payroll] Debit Agreement (ADA) is enforced and fully complied with.

By affixing my signature below, I am fully aware and have understood the provisions of this Agreement, the Articles of Cooperation and By-laws, and agree to abide by the abovementioned conditions as well as the imposition of sanction(s) against me in case/s of commission of acts not in accordance or against the above-said provisions.

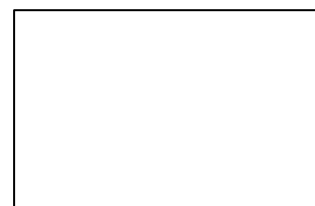
In witness hereof, I have hereunto affixed my signature and right-hand thumb mark this _____ day of _____, 20 ____

Signature over Printed Name

Accomplished: _____

(Date)

(Place)



Right Thumb Mark