



MOBILE CHANNELS APPLICATION FORM

Please complete the form in BLOCK LETTERS

Institution Name		Date	
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Surname	First Name	Middle Name	Title

Date of Birth	Sex (M/F)	Profession	Address

*Address Indicator <i>Please tick applicable</i>	Home <input type="checkbox"/>	Work <input type="checkbox"/>	Physical <input type="checkbox"/>
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Email Address		Mobile No.	
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Primary Member Account Number:

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Primary Member Account Type:

MOBILE CHANNELS

1. TERMS AND CONDITIONS

I hereby agree that if my application is successful, the following conditions will apply:

i. Losses

The member/customers shall be liable for all amounts arising from and/or losses incurred by the MFI Hub in connection with the use of the mobile channels service.

ii. Charges:

The Sacco/MFI is hereby authorised to debit the member's account with service/transaction fees and other charges in line with its tariff.

iv. Loss of Service:

If the service is not available or transaction has failed, the member shall immediately phone the Sacco. This may be followed by a written email notification to the MFI Hub.

v. Reservations

The Bank reserves the right to withdraw the service at any time without notice.

vi. For other terms and conditions, please see Sacco's Rules & Regulations of Membership.

2. DECLARATION

I acknowledge and agree that:

- a) The is provided by and remains a service under the MFI Hub.
- b) The service shall be used for the intended purpose thereon.
- c) Necessary precaution shall be exercised against loss or disclosure of PIN and I shall ensure that any record of the PIN is kept secure.
- e) I am responsible for all payments made arising from any unauthorized transaction concluded before the MFI Hub is reasonably able to action the notice of loss or theft the PIN.

Signature of Applicant: _____ Date: _____

Sacco / MFI Manager's Signature: _____ Date: _____

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<p><u>FOR SACCO / MFI USE ONLY</u></p> <p>Application approved/declined:-----</p> <p>Checked by:-----</p>
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