MANATAL MULTI-PURPOSE COOPERATIVE
MEMBER APPLICATION FORM

2 X 2 Picture Attach Here

1.) _____

2.) _____

3.) _____

* Affix three (3) signatures of the same form

Please affix your left thumb here.

Please affix your right thumb here.

MEMBER CODE:	MEMBERSHIP DATE:	TIN:	CELL PHONE NO.:

LAST NAME:	FIRST NAME:	MIDDLE NAME:	NICKNAME:

RESIDENCE ADDRESS:

ADDRESS: NO./STREET/VILLAGE:	BARANGAY:	CITY/MUNICIPALITY:	PROVINCE:

ZIP CODE	EMAIL ADD:	FACEBOOK ACCOUNT:

DATE OF BIRTH: (mm/dd/yyyy)	AGE:	SEX: ○ MALE ○ FEMALE	PLACE OF BIRTH:

CIVIL STATUS: (mm/dd/yyyy) ○ SINGLE ○ MARRIED ○ WIDOW/ER ○ OTHERS: | NUMBER OF CHILDREN:

EDUCATIONAL ATTAINMENT: ○ ELEMENTARY ○ HIGH SCHOOL ○ VOCATIONAL ○ COLLEGE ○ UNDER GRADUATE ○ POST GRADUATE | COURSE:

Occupation:

If Employed:	**Business:**
Employer Name:	Business Name:
Nature of Business: Position:	Nature of Business:

LAND OWNERSHIP: ○ AGRICULTURAL ○ RESIDENTIAL ○ COMMERCIAL ○ INDUSTRIAL | ADDRESS: ○ SAME AS RESIDENCE ADDRESS ○ DIFFERENT FROM RESIDENCE ADDRESS

CITIZENSHIP: ○ FILIPINO ○ OTHERS: | HOME OWNERSHIP: ○ OWNED ○ RENTED ○ LIVING W/ PARENTS ○ TENANCY | Length of Stay:

NAME OF PARENTS:

FATHER'S NAME:	MOTHER'S MAIDEN NAME:

Is your spouse a **Manatal Coop** Member? ○ YES ○ NO

SPOUSE NAME:	DATE OF BIRTH (mm/dd/yyyy):	OCCUPATION:	Spouse's Contact Number:

VALID IDENTIFICATION (APPLICANT):

GSIS / SSS / UMID NO.:	Pag-Ibig NO.:	Philhealth No.:	Others:

VEHICLE/S: ○ YES ○ NO

Own:	**Mortgage:**
1.	1.
2.	2.

AGRARIAN REFORM BENEFICIARY:

ARB Beneficiary? (Agrarian Reform Beneficiary) ○ NO ○ YES **Area:**

Location:

If yes, ARB household (Number of family members)

SOURCE OF INCOME:

- ☐ EMPLOYMENT
- ☐ BUSINESS
- ☐ SIDELINE
- ☐ OTHERS PLEASE SPECIFY:

MONTHLY INCOME RANGE:

- ○ 10,000 and Below
- ○ 11,000 - 20,000
- ○ 21,000 - 30,000
- ○ 31,000 - 40,000
- ○ 41,000 - 50,000
- ○ 51,000 - 60,000
- ○ 61,000 and Above

Other Info:	**YES**	**NO**
4 P's Beneficiary	○	○
Solo Parent	○	○
PWD	○	○

RECOMMENDED BY:

NAME:	RELATIONSHIP:	MEMBER CODE:

BENEFICIARY: Hierarchy (if married—spouse & children; single—parents/siblings

Na ang aking idineklarang "beneficiary/ies" ay ang aking kahalili na siyang aking binibigyan ng lahat ng karapatan at tatayo bilang aking kinatawan sa lahat ng aking deposito, benepisyo, karapatan at pagmamay-ari mula sa Manatal Coop kailanma't ako ay wala ng kakaya-han o hindi na magawa ang anumang transaksyon sa Manatal Coop para sa aking sarili, lalo't higit sa sandaling ako ay pumanaw.

FULL NAME:	RELATIONSHIP:	DATE OF BIRTH (mm/dd/yyyy):
1		
2		
3		
4		
5		
6		
7		
8		

Do you have any relative or affiliates in Manatal Coop?

Name	Relationship
1.	
2.	

Life Saving Deposit (MAF / Insurance)

Ito ay Life Insurance, at ang pamilya ng miyembro ay makakatanggap ng takdang halaga mula sa Insurance Provider ng ating kooperatiba. Batid ko na kailangan ko itong bayaran kada taon.

○ SASALI

Lagda ng Miyembro

○ NOT QUALIFIED
○ OVER AGE
○ OTHERS:
Reason:

Lagda ng Miyembro

Care for Members Program (*Abuluyan*)

Ito ay sistemang "Abuluyan" at ang pamilya ng kasapi sa programang ito ay makakatanggap ng **donasyon** mula sa lahat ng kasapi sa programa.

○ SASALI

Lagda ng Miyembro

○ HINDI SASALI

Lagda ng Miyembro

○ NOT QUALIFIED
○ OVER AGE
○ OTHERS:
Reason:

Lagda ng Miyembro

QUESTIONS REQUIRED TO ANSWER:

1. What is your purpose in joining MANATAL COOP?
2. Are you willing to attend to Membership Education Seminar of the Cooperative? ○ YES ○ NO
3. Have you been a member of MANATAL COOP? ○ YES ○ NO
4. What can you contribute to MANATAL COOP as a member?

I hereby certify that all the information I have provided in this application are true and correct to the best of my knowledge. Any false information, omission, concealment or misrepresentation will be sufficient cause for denial of my membership.

Applicant's Signature

REMINDERS: *If there's any changes in address, contact number and status please notify MANATAL COOP as soon as possible.*

Sketch

MANATAL MULTI-PURPOSE COOPERATIVE
Bunsuran 2nd, Pandi, Bulacan

KAHILINGAN SA PAGSAPI AT PANANAGUTANG KASUNDUAN

Ako, si G./Gng./Bb. _____, nakalagda sa ibaba nito ay humihiling na maging kasapi ng Manatal Multi-Purpose Cooperative at ako ay nangangakong tutupad sa mga sumusunod:

1. Bayaran ang kasapiang butaw na may halagang Php500.00.
2. Magbayad ng itinakdang Saping Puhunan (Share Capital)
   a. Na, ang aking nauunawaan na ang Saping Puhunan ay salaping taya.
   b. Na, ang nasabing Share Capital ay hindi ko maaaring kuhanin o non-withdrawable maliban na kung ako ay titiwalag na bilang kasapi.
   c. Na, hindi ko kukuhanin ang saping puhunan ng paunti-unti o *partial withdrawal*.
   d. Na, kung sakaling dumating ang panahon na kailangan kong kuhanin ang aking saping puhunan, ako bilang kasapi ay kailangang sumulat sa Lupong Patnugutan 60 araw patiuna para sa kanilang pagsang-ayon.
   e. Na, aking nauunawaan na sa oras na kuhanin ko ang aking saping puhunan, ako ay automatikong kumakalas bilang kasapi ng kooperatiba at ang lahat ng pribilehiyo at benepisyo bilang isang kasapi ay automatikong mawawala.
   f. Na, bilang isang kasapi na may gulang LIMAMPU'T SIYAM (59) na taon pababa ay obligado kong bayaran ang aking Life Saving Deposit (Mortuary Assistance Contribution - Insurance Premium) taun-taon ng halagang APAT NA DAANG PISO (Php400.00).
   g. Na, pananagutan ko na magsadya sa opisina ng Kooperatiba upang punuan o bayaran ang anumang kakulangan sa aking taunang kontribusyon sa Life Saving Deposit (Mortuary Assistance Program).
   h. Na, pananagutan ko na magsadya sa opisina ng Kooperatiba upang punuan o bayaran ang anumang kakulangan sa aking taunang kontribusyon sa Care for Members Program (*Abuluyan*).
   i. Na, kung ako ay may pagkakautang o pananagutan ng lagpas na sa takdang panahon (past due), ako ay kusang loob na sumasang-ayon na kuhanin ng Kooperatiba ang aking saping puhunan at ibayad sa aking pagkakautang na hindi na kailangang bigyan pa ng abiso.
   j. Na, kung ako bilang kasapi ay patuloy na lalabag sa mga alituntunin ng pagbabayad ng pananagutan, ang Patnugutan ay may karapatan na ako ay itiwalag sa ating kooperatiba ng hindi na kailangang bigyan pa ng abiso.
   k. Na, kung ako bilang kasapi ay makikisangkot o masasangkot ng anumang hakbang laban sa kooperatiba, ang Patnugutan ay may karapatan na ako ay itiwalag sa ating kooperatiba ng hindi na kailangang bigyan pa ng abiso.
3. Makilahok sa palatuntunan na pag-iimpok gaya ng Pagpapalaki ng Saping Puhunan (Capital Build-Up) / Savings & Time Deposit.
   a. Tuparin ang pagbabayad ng Ipinangakong Saping Puhunang Bibilhin (Subscribe Capital).
      1. Bilang ng Subscribe Capital (*Common Share / minimum of* Php12,000.00) _____ na nagkakahalaga ng Php1,000.00 bawat sapi (*share*) na magsisimula sa ika-___ ng _____ hanggang ika- __ ng _____.
      2. Bilang ng Subscribe Capital (P*referred Share / minimum of* Php4,000.00) _____ na nagkakahalaga ng Php100.00 bawat sapi (*share*) namagsisimula sa ika-___ ng _____ hanggang ika- __ ng _____.
   b. Sumunod sa itinakdang polisiya ng pangasiwaan ukol sa nabanggit na pag-iimpok ayon sa sumusunod:
      1. Hindi kukulangin sa limang porsiento (5%) ng salaping nai-utang;
      2. Hindi kukulangin sa dalawang porsiento (2%) ng kinikita;
      3. Hindi kukulangin sa limampung porsiento (50%) ng interes ng saping puhunan at balik tangkilik.
4. Dumalo sa lahat ng pagpupulong, panayam at pag-aaral na itinakda ng Patnugutan at ang hindi ko pagtupad dito ng walang sapat na dahilan ay nangangahulugan na ako'y mumultahan, masususpindi o matitiwalag sa kooperatiba sang-ayon sa pasya ng Patnugutan ng hindi na kailangang bigyan pa ng abiso ang isang kasapi.

Ang mga pasubali sa kasunduang ito at mga alituntunin panloob at artikulo ng kasapian ay naipaliwanag sa akin. Ito ay malinaw kong naunawaan at sumasang-ayon ako sa lahat ng patakaran.

Sa lahat ng nabanggit sa itaas, batid ko na ang lupon ng patnugutan ng kooperatiba ay maaaring magtakda ng anumang kaparusahan laban sa akin na hindi kinakailangang magdaan sa hukuman.

Pinatutunayan ko at inilalakip ang aking lagda ngayong ika- _____ ng _____, 20___ dito sa tanggapan ng Manatal Coop sa Bunsuran 2nd, Pandi, Bulacan.

_____
Lagda

PINAGTIBAY:

_____
Taga-Pangulo ng Lupon ng Pag-aaral

_____
Ingat-Yaman

_____
Taga-Pangulo ng Lupon

R.A. 9510 - Credit Information System Act (CISA Law)

Ang ***Batas Republika Blg. 9510***, na kilala rin bilang Credit Information System Act (CISA Law) ng 2008 ay nagtalaga ng mga kapangyarihan at tungkulin ng *Credit Information Corporation* [CIC] na magtatag ng isang komprehensibo at sentralisadong sistema ng impormasyon ukol sa *credit* o pangungutang. Ito ay para sa koleksyon at pagbibigay ng kumpleto at tamang impormasyon na may kinalaman sa pangungutang at iba pang may kaugnayan sa pagbeberipika ng kundisyon ng isang indibidwal na magagamit ng lahat ng mga kabahagi sa sistema ng impormasyong ito.

Bilang bahagi ng Manatal Coop, AKING kinikilala at binibigyan ng karapatan ang MANATAL COOP na magsumite ng materyal na impormasyon sa *Credit Information Corporation* [CIC], ayon sa itinatadhana ng Republic Act No. 9510, at Circular No. 2015-1, Serye ng 2015. Nagbibigay-daan ito upang maibigay at maghatid ng anumang impormasyon ukol sa aking katayuan sa MANATAL COOP, o anumang pagbabago ukol dito, sa ibang kooperatiba, bangko at *financial institution* na akredito ng CIC.

Ipinagtitibay ko ang aking pagsang-ayon sa pamamagitan ng pagtatala ng lahat ng detalye sa *membership update information sheet* at sa paglalagay ng aking lagda sa ibaba.

Lagda ng Miyembro	Petsa

Kasunduan tungkol sa Collection Agency

Ang kasunduang ito ay naglalaman ng pagsang-ayon at pagkakabatid ng lahat ng mga miyembro ng MANATAL COOP ukol sa pagpapahalaga sa sistemang pinansyal ng kooperatiba. Upang mapangalagaan ang ari-arian at katayuang pinansyal ng kooperatiba ay ipinababatid ng MANATAL COOP na sa lahat ng mga miyembrong nais manghiram o mangungutang sa ating kooperatiba ay naglaan po tayo ng sapat na panahon ng pagbabayad para sa inyong mga nahiram na salapi. Ito ay makikita sa inyong *monthly amortization*.

Pasubali: Sang-ayon sa kasunduang ito, upang maprotektahan ang interes ng kooperatiba at anumang halagang ibinahagi ng bawat miyembro ay mahigpit nating ipapatupad ang pagkolekta sa mga naipahiram ng kooperatiba at kung sakaling dumating sa puntong ang mangungutang *[borrower]* o kahalili *[co-maker]* nito ay hindi na kayang singilin ng kooperatiba ay isasangguni na natin ang pangongolekta ng kanilang balanse sa ating akreditong kompanya para sa koleksyon.

Anumang karampatang legal na aksyon ay maaari ding isagawa ng kooperatiba ayon na rin sa rekomendasyon ng legal na lupon at ng akreditong kompanya para sa koleksyon.

Bilang pagpapatibay na aking nauunawaan ang lahat ng mga paliwanag ukol kasunduang ito ay kusa kong inilakip ang aking lagda sa ibaba.

Lagda ng Miyembro	Petsa

Sa paglagda ko sa ibaba nito, pinapatunayan na ang lahat ng kasagutan ng tanong sa mga naunang pahina ay pawang katotohanan at lubos kong nauunawaan ang lahat ng paunawa at mga impormasyong nakasaad sa *Membership Application Form*.

Lagda ng Miyembro	Petsa

MANATAL MULTI-PURPOSE COOPERATIVE

"Alalay Mo Sa Hanapbuhay"

MEMBERSHIP CHECKLIST CONFIRMATION FORM

Date: _____ Code: _____

Name: _____

1 Membership Classification *Please mark check (✓) on the box as sign of confirmation*

ASSOCIATE MEMBER

BRONZE

Preferred Share Capital	100	
Membership Fee	500	*as per BR#013-01/11/2022*
	600	

SILVER

Preferred Share Capital	1,000
Regular Savings Deposit	500
Membership Fee	500
Life Insurance (life S/D)	400
	2,400

GOLD (*Qualified for Regular Membership*)

Preferred Share Capital (Max. P20,000)	4,000
Regular Savings Deposit	1,000
Membership Fee	500
Life Insurance (life S/D)	400
Care for Members (CFM)-*optional*	500
	6,400

REGULAR MEMBER ☐

RUBY (at least 1 year of membership)

Common Share	12,000	
Preferred Share	4,000	*as per BR#112 - 03/24/2020*
Regular Savings Deposit	1,000	
Life Insurance (life S/D)	400	
	17,400	

EMERALD (at least 2 years of membership)

Common Share	30,000	*as per Mem. Policy 6.23.20*
Preferred Share Capital	10,000	
Regular Savings Deposit	1,000	
Life Insurance (life S/D)	400	
	41,400	

DIAMOND (at least 5 years of membership)

Common Share	75,000	*as per Mem. Policy 6.23.20*
Preferred Share Capital	25,000	
Regular Savings Deposit	1,000	
Life Insurance (life S/D)	400	
	101,400	

Note: New Member Applicants who does not enroll in the CFMP within the two (2) years grace period shall no longer be accepted into CFM program even he/she applies in the future. (as per BR#002-01/08/2020) ☐

2 Life Insurance ☐

- P400 pesos yearly premium
- Age limit: 18-59 years old

3 Care for Members (CFM) - *revised Mem. Benefit policy: 8/11/20* ☐

- P500 initial payment upon enrollment ***(Qualified if Gold Associate)***
- replenish every January
- Age limit: 18-55 years old (*as per BR#002-01/08/2020)*
- claims upon death
- *considered MIGS if qualified to registered 4x on the last 5 GA's (policy ammended 8/25/20)*

Note: require medical clearance from Coop Doctor if with noticeable sign of illness.

4 Loyalty (No Premium) - *revised Mem. Benefit policy: 8/11/20* ☐

- claims upon death
- Ruby Members (5 years membership) & qualified to register (3x MIGS) on the last GA
- Emerald Members (10 years membership) & qualified to register (4x MIGS) on the last GA
- Diamond Members (20 years membership) & qualified to register (5x MIGS) on the last GA

5 Interest on Share, Patronization Incentive & Patronage Refund ☐

- depends on the income of the cooperative

6 Wedding Gift (April 8, 2019) ☐

- first legal marriage
- Atleast 5 years of membership (only Ruby, Emerald & Diamond members are qualified)
- Copy of Marriage Certificate, pictures and other proof of marriage should be submitted for availment **not later than six (6) months after marriage**
- *members must be qualified to register 3x (MIGS) in the last 4 GA's (policy ammended 11.10.20)*

7 First Born Gift (starting: April 8, 2019)
- legally married
- Atleast 5 years of membership (only Ruby, Emerald & Diamond members are qualified)
- Copy of Birth Certificate, copy of Marriage Certificate, pictures and other proof of birth should be submitted for availment not later than six (6) months from birth.
- *members must be qualified to register 3x (MIGS) in the last 4 GA's (policy ammended 11.10.20)*

8 Silver Wedding Gift (April 8, 2019)
- legal marriage
- Atleast 5 years of membership (only Ruby, Emerald & Diamond members are qualified)
- Copy of Marriage Certificate, pictures and other proof of marriage should be submitted for availment **not later than six (6) months after silver anniversary**
- *members must be qualified to register 3x (MIGS)in the last 4 GA's (policy ammended 11.10.20)*

9 Golden Wedding Gift (April 8, 2019)
- legal marriage
- Atleast 5 years of membership (only Ruby, Emerald & Diamond members are qualified)
- Copy of Marriage Certificate, pictures and other proof of marriage should be submitted for availment **not later than six (6) months after golden anniversary**
- *members must be qualified to register 3x (MIGS) in the last 4 GA's (policy ammended 11.10.20)*

10 FREE Medical Consultation *(atleast Silver Associate)*
- Main office clinic
- Doctor's schedule is once a week (from 9am to 3pm)

11 Hospitalization benefits (no premium)
- Qualification: Ruby, Emerald and Diamond with atleast **5 years of membership**
- Maximum of four (4) days per year
- *members must be qualified to register 3x (MIGS) in the last 4 GA's (as per BR#070-02/23/2021)*

12 Health Care Program
- during Fundation Day (month of August)
- FREE Medical, Optical & Dental services
- Wellness services (ex. hair cutting, manicure/pedicure and foot spa)

13 Member get Member
- P100 for every recruit member/s

14 Scholarship Program *(revised Mem. Benefit policy: 8/11/20)*
- indigent members
- incoming college student
- with average grade of 88% and above
- Parent must be a member of Manatal Coop (Silver Associate and at least 3 years of membership)
- subject for Board approval

15 Gift During General Assembly
- Free raffle tickets for borrowers, depositors & members (with required amount)
- Free Gifts & Prizes

16 Posting on Facebook YES NO

I hereby giving my consent to Manatal Coop to post my picture/s to social media using their official FB account as new member of our cooperative.

17 Social Media Policy YES

I understand that Manatal Coop has Social Media Policy to establish professional use of it when referencing to Manatal Coop. Using of inapproriate words is strictly prohibited.

Sanctions for violating the Social Media Policy by Cooperative Members shall be applied upon the decision of the Board of Directors.

18 Ownership Seminar/Webinar YES

All new members must attend on this seminar

19 Manatal Coop App (Android Only) YES

This App is used to view your account balances, information videos, current events and more. Interested to Install?

20 Members Business Directory in Manatal Coop App (For Entrepreneur Members Only) YES

This App is used to view your account balances, information videos, current events and more. Interested to Install?

NOTE: All informations and requirements above may be changed, modified or terminate upon the approval of the Board of Directors or General Assembly

I certify that all information above is clearly explain and I fully understand. Affix my signature as conformity

Signature over Printed Name

Created: August 22, 2019 revised 05/10/2023