



ASILI SACCO SOCIETY LIMITED
P.O BOX 49064 – 00100 NAIROBI
Email: info@asilisacco.coop
Website: www.asilisacco.com

0202630244/0202699305/0722472823/0733472823

EDUCATION SAVINGS ACCOUNT OPENING FORM

NameEST/BMNO.....
ID/Passport No.
Mobile No.
Email
Employer (If applicable)
Signature Date

OFFICIAL USE ONLY

Account opened by: NameSig.....Date.....
Verified by: Name.....Sig..... Date.....

Requirements

- ✓ *Savings withdrawable after 12 months*
- ✓ *Interest is determined from time to time*
- ✓ *Free bankers cheque*
- ✓ *Premature cheque clearance at Ksh. 500*
- ✓ *ID photocopy*
- ✓ *Passport size photo*