

## **DEPARTMENT FOR CO-OPERATIVE DEVELOPMENT**

## **PART A**

## APPLICATION FOR REGISTRATION OF A CO-OPERATIVE SOCIETY (CAP 42:04)

## To be completed by the applicants

We, the undersigned, hereby apply for the registration of
The proposed area of operation is:
We request that the Society have Limited /Unlimited Liability. (Delete whichever is inapplicable)

We request that we be given the powers, duties, responsibilities and organization of a Co-operative Society as per the Co-operative Societies Act, the bye-laws of the proposed society and the direction of the general membership.

We certify that the undersigned persons, being the applicants are all above the age of 18 years, and are resident within, or in occupation of land within or in employment within the society's proposed area of operation:

PART B

No.	NAMES (IN BLOCK LETTERS)	ID NO.	DATE OF BIRTH	GENDER	PHYSICAL ADDRESS	SIGNATURE

DATE OF APPLICATION	
RECEIVED BY CO-OPERATIVE OFFICER	
REGISTRATION FEE PAID: P	DATE