



E-statement Application Form

Membership No. _____ NRC: _____

Legal Name (Full name): _____

Personal Email: _____

Mobile Number: _____

Organisation: _____

[] Yes, I'd like to signup for the E-statement login portal to access my statements (Savings, Loans and Shares) .

I _____ agree that all personal data above is correct and is presented for the purpose of my access to E-statements through a web portal as provided to me by **CareCoop**.

Signature of Member

Date

Once filled in, please send to estatements@carecoop.co.zm

OFFICIAL USE

Received: _____ Date: _____

Processed by: _____ Effective Date: _____

Remarks: _____