



**OFFSPRING MEMBERSHIP APPLICATION FORM**

**Attach Passport  
Size Photo**

Name: ..... Surname.....

Date of Birth ..... Birth Cert. No .....

Email.....Telephone .....

Residential Address.....Trustee/guidance.....

**Source of income:** Self ☐ Parent ☐ Others ☐

Amount to save GMD.....In words : .....  
.....

**PARENT**

Name..... Surname.....

Permanent Address..... National ID .....

Email Address..... Telephone.....

Parent school/ Institution.....Employment Number.....

I Mr/Mrs hereby Authorized GTUCCU to deduct from my salary sum of GMD

..... monthly as savings for my offspring (s)

.....

Signature of the beneficiary

.....

Date .....

Signature of the parent

.....

Date.....

Please attach a photocopy of the parent identity card and the child's birth certificate.