



# member application form

SL 5

Are you an existing nasfund Contributor? <input type="radio"/> Yes <input type="radio"/> No If yes provide your membership number										nearest ncsl branch:	
nasfund Membership Number:											

## Request type:

Account (s)	Channel	Additional Account (s)
<input type="radio"/> New Membership <input type="radio"/> Member Data Update	<input type="radio"/> Member Online Services <input type="radio"/> Mobile USSD Services <input type="radio"/> Self-Service Identification <input type="radio"/> Poro Card	(Note: Applicable for required members only) <input type="radio"/> Long Service Leave: _____ <input type="radio"/> Agriculture: _____ <input type="radio"/> Housing Scheme: _____

## (a) Member Personal Details

Mr, Mrs, Ms, Miss. Full Name: (First Name, Middle Name & Last Name):		
Date of Birth:	Gender:	Marital Status:
Residential Address:		
Mobile (Personal):	Email:	
Village:	District:	
Province:	Residing Town:	

## (b) Savings & Loan Society Membership

How did you know about ncsl? (Please tick circle) <input type="radio"/> Employer <input type="radio"/> Media <input type="radio"/> Presentation <input type="radio"/> Other (Please state):
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## (c) Employment Details

(Note: Not applicable for EDA SUPA members)

Company Name:	Pay Officer/HR Email:
Occupation:	Office Phone:
Address:	

**(d) Nomination Of Beneficiaries**

In the event of my death, the net proceeds of my account with NCSL should be disbursed according to my nomination(s) as follows: nomination(s) as follows;

Full Name	Address	Relationship	Percentage 100%

**(e) Salary Deduction Authorization (Note: Not applicable for EDA SUPA members)**

General Savings	Education Savings	Christmas Savings
K (K20 minimum)	K (K20 minimum)	K (K15 minimum)

Please note that it is mandatory for every NCSL member to have a Poro Account and be issued a Poro Card. The minimum contribution to your Poro Account is K10.00 upon first time registration.

Poro Account
K (K10 minimum)

**(f) Poro Account Deposit**

I authorize NCSL to debit my General Savings Account with an amount of K10.00 and credit my Poro Account.

I authorize the deduction of K _____ from my salary, to be paid fortnightly/monthly to the NCSL on my behalf.
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**(g) Identification**

Please attach a clear copy of your valid ID Card when submitting your application form, ncsL shall verify and keep the copy on file. (at least 1 ID copy attached)

Type of ID provided 1:	Type of ID provided 2:
Reference (ID Number):	Reference (ID Number):

**(h) Channel(s)**

Mobile USSD Services:	<input type="checkbox"/> New	<input type="checkbox"/> Amendment	<input type="checkbox"/> Cancellation
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I agree that my account can be accessed through mobile banking.

Existing number (for cancellation and amendments only)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
New number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Member Online Services:	<input type="checkbox"/> New	<input type="checkbox"/> Amendment	<input type="checkbox"/> Cancellation
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I agree that my account can be accessed through Member Online Services.

Existing email address (for cancellation and amendments only)	<input type="text"/>
New email address	<input type="text"/>

Self-service identification:	<input type="checkbox"/> New	<input type="checkbox"/> Amendment	<input type="checkbox"/> Cancellation
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I agree that my account can be accessed on the Self-service channel. (Member to authorise on declaration)

**(i) Poro Card**

Poro Debit Card:	<input type="checkbox"/> New	<input type="checkbox"/> Replacement	<input type="checkbox"/> Cancellation
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Preferred branch for Card Collection	
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**This section is to be completed for replacement and cancellation**

Poro Debit Card:	<input type="checkbox"/> Pin reset	<input type="checkbox"/> Card/Pin	<input type="checkbox"/> Pin
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Card Number:	Date Card was Lost/Stolen:
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Maintenance Type:	<input type="checkbox"/> Lost	<input type="checkbox"/> Stolen	<input type="checkbox"/> Locked	<input type="checkbox"/> Other (if other please specify):
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Reason for Maintenance:
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**This section only applies to when member collects card/pin**

Signature of Applicant:	Name:
	Date:

**(j) Additional Account(s) (Note: Applicable for required members only)**

Long Service Leave	Agriculture	Housing Scheme (MMJV Employees)
<input type="checkbox"/> I agree with the terms and conditions of the account.  Net Value: K _____	<input type="checkbox"/> I agree with the terms and conditions of the account.  Estate number: _____ Block number: _____	<input type="checkbox"/> I agree with the terms and conditions of the account.

**Declaration**

I hereby apply to become a member of ncsI. I agree to pay all charges levied by the Rules of the Society and by any amendments thereof registered in accordance with the Savings & Loan Societies (Revised Act 2015). I agree to contribute no less than K20.00 per payment to ncsI.

I certify that the information provided on this form is true and accurate. I accept ncsI's Terms & Conditions which apply to my account(s) and transactions that I conduct on my account(s)

	Name:
Signature of Applicant:	Date:

Note: After completing this form send it two (2) weeks before the beginning of the deduction period to:

**Office Use:**

Date Received:		
Received by:	Date:	Signature:
Checked by:	Date:	Signature:

**Card/Pin**

Date Received:		
Pin Issued by:	Date:	Signature:
Card Issued by:	Date:	Signature:

# new member identification checklist

SL 5B

This Checklist is to be used by the new intending member to provide the correct ID combination when submitting a new member registration form.

## A. Individual Customer Identification

Types Of Identification	Acceptable information marked X MUST show							
	Full Name	Date of Birth	Nationality	Expiry Date	ID Number	Gender M / F	Address	Occupation
<b>PRIMARY – PHOTOGRAPHIC ID</b>								
PNG Passport	X	X	X	X	X	X		
PNG Driver's Licence	X	X		X	X		X	
National Identity Card (NID)	X	X	X	X	X			
Firearm License	X	X	X	X			X	
Superannuation Membership Card	X				X			
Employment ID Card with Employment Confirmation Letter (Company Seal to be attached)	X	X	X	X			X	X
Current student ID Card with School Confirmation Letter (School Seal to be attached)	X	X	X	X				X
Valid Foreign Passport with Valid Visa & Valid PNG Work Permit (Foreigners)	X	X	X	X	X	X	X	X
ID size photo with Hospital Clinic Book (Child between 1-10)	X	X	X			X	X	
<b>SECONDARY – NON-PHOTOGRAPHIC ID</b>								
Police Clearance issued within the last six (6) months	X	X	X					
Birth Certificate issued by NID office	X	X	X					
Statutory Declaration signed by a Commissioner of Oaths	X	X	X	X			X	X
ID Letter by LLG President	X	X	X	X	X		X	X
ID Letter by a District or a Local Village Court Magistrate	X	X	X				X	X
ID Letter by a Pastor/Priest	X	X	X	X	X		X	X
ID Letter by a Bank Manager	X	X	X	X	X		X	X
ID Letter by registered Lawyer	X	X	X	X	X		X	X
ID Letter of a registered Accountant	X	X	X	X	X		X	X
ID Letter of a registered Medical Practitioner (Doctor/ Nurse/ HEO/ Dentist/ Pharmacist/ Physician)	X	X	X	X	X		X	X
ID Letter by a current Member of Parliament	X	X	X	X	X		X	X
ID Letter by Commissioned Officers of the Dept of Defence, Police or Correctional Services	X	X	X	X	X		X	X
Dual Citizenship Certificate	X	X	X		X	X		
Marriage Certificate	X							

## A. Instructions

- Applicant must always present the original identification document at the counter, or a copy certified by a lawyer. Applicant is required to present any of the following ID combinations in Primary & Secondary to be applicable.
  - Two photo IDs under PRIMARY. **Eg; Passport & Driver's License.**
  - One photo ID under PRIMARY plus One non-photo ID under SECONDARY.  
**Eg;**
    - **NID + Birth Certificate issued by NID Office.**
    - **Superannuation Membership Card + Id letter from Priest/Pastor.**
    - **Id size photo with clinic book + Birth Certificate Issued by NID office (KSA).**
    - **Valid Foreign Passport with Valid Visa & Valid PNG Work Permit (Foreigners) + Id Letter by registered lawyer.**
- ID documents combination MUST include a facial image of photograph and capture the following;
  - Full Name
  - Date of Birth
  - Nationality of place of Birth
  - Expiry Date
  - Identification Number
  - Gender
  - Address
  - Occupation
- It is NOT acceptable for customer to produce two forms of the same identification type.
 

Example: (a) ID Letter form LLG President and ID letter from Pastor/ Priest – **NO**  
 (b) ID Letter from LLG President and NID Card – **YES**
- All name variances must be linked by a proper identification document such as, confirmation letters, statutory declarations, marriage certificates and or birth certificates etc...