



PARAGON MULTIPURPOSE
CO-OPERATIVE SOCIETY LIMITED

Membership Form

Membership number: PMCS/2024/

Personal Information

- Title (Mr./Mrs./Dr. etc.):
- Full Name (First/Middle/Last):
.....
- Date of Birth (mm/dd/yyyy):
- Correspondence Email:
- Telephone: (Home) _____ (Mobile) _____

Residential Address (Nigeria)

- Home Address:
.....
.....

Address in Country of Residence (if different)

- Address:
.....
-

Passport Information

- Passport No.:
- Passport Expiry (mm/dd/yyyy):

Business Address

- Employer:



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- Title:
- P.O. Box:
- Telephone (Work): _____
- Street:
.....
.....
- City:
- State:

Nominee Information

(The individual mentioned below shall be your Nominee as enshrined in the Bye Laws)

- Title (Mr./Mrs./Dr. etc.):
- Full Name (First/Middle/Last):
.....
- Date of Birth (mm/dd/yyyy):
- Correspondence Email:
- Relationship with Nominee:
- Telephone (Mobile): _____

Home Address (Nigeria)

- Home Address:
.....
.....

Address in Country of Residence (if different)

- Address:
.....
.....



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Criminal Conviction

Have you ever been convicted on any criminal offence involving dishonesty (fraud, financial impropriety, etc.) or are currently under any criminal investigation?

- Yes (Please provide details):
- No

Bankruptcy

Have you ever been declared bankrupt?

- Yes (Please provide details):
- No

Referred by

Referred to PMCS by Whom? (Name):

.....

Declaration

I have read the following and hereby undertake:

- To comply and act in accordance with the Bye-Laws as they now exist, or as they may in the future be amended, and comply with such other requirements as the General Meeting or Management Committee may deem necessary.
- To promote the Objects of PMCS as far as in my power.
- Not at any time after ceasing to be a member to use or permit to be used in conjunction with my name, or name of any organization with which I may at any time be associated, any designation or expression denoting or suggesting membership or any connection with PMCS.
- To pay promptly any monies due to PMCS, whilst in membership.
- To declare any criminal conviction within 30 days.


 16, Raheed Alaba Williams Street,
 Off Admiralty Way, Lekki Phase 1,
 Lagos State.


 +234 803 937 1303
 +234 803 242 5192
 +234 806 505 4073


 secretariat@paragoncooperative.com



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I understand and accept that if at any time PMCS discovers that I have failed to disclose any of the above or that I have provided false information, it will have the right to terminate my membership with immediate effect in line with the relevant sections of the Bye Laws.

This information will be treated confidentially.

I understand and accept that I am accountable for the truth of this declaration.

- Name in Full:
- Signature:
- Date:

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