WE ARE LIFT

CREDIT UNION INSTITUTION



Liberia Initiative For **Transformation**

FOR MORE INFORMATION:

Tel: (+231)777531-128/886531128 Email: liftliberia2011@gmail.com

Facebook: https://www.facebook.com/liftliberia

HOW TO BECOME A MEMBER?

One can become a member through share purchase, annual registration and book purpose.

VISION

To build loan services brand that will become the lead choice for individuals, small businesses and members in the whole Liberia.

MISSION

To provide professional reliable and trusted credit union services that assist individuals businesses, startup, low income employees and registered organizations in achieving their goals with little or no stress

CODE VALUE

Shows our zest, value, integrity, security, service, excellence and team work.

AIMS AND OBJECTIVES

To uplift our organization and the lives of our members by providing excellent financial, agriculture, real estate development, mining and allied services.

OUR SERVICES

- Credit Union
- Savings
- Loan
- Mini Housing
- Agriculture
- Mobile Money
- Money Exchange
- Send Wave
- Training







CREDIT UNION MEMBERSHIP APPLICATION FORM

SIGNATURE OF APPLICANT



DATE

								Transformation	
FOR IN	ERNAL USE ONLY								
Name of Credit Union: LIBERIA INITIATIVE FOR TRANSFORMATION (LIFT) Branc						:h			
Accoun			Date o	Date of Application					
ABOUT	YOU								
☐ MR. ☐ MS. ☐ MRS.	RANK	SURNAME		FIRST NAME			MIDDL	E NAME (S)	
	MAIDEN NAME	PREVIOUS NAME (IF APPLICABLE) AL							
DATE OF BIRTH (DD/MM/YY)		MARITAL STATUS SINGLE MARRIED DIVORCED			# OF DEPENDENTS AGE(S) OF EACH				
PLACE OF BIRTH		FORM OF IDENTIFICATION VOTER'S ID PASSPORT POLICE I.D			☐ DRIVER'S LICENSE		IDENTI	IDENTIFICATION #	
TRANSACTION REFERENCE NUMBER OF APPLICANT		EXPIRY DATE:					NATION	NALITY	
HOME ADDRESS					COUNTRY OF RESIDENCE			OWN RENT OTHER	
MAILING ADDRESS (IF DIFFERENT FROM HOME ADDRESS)									
PREVIOUS HOME ADDRESS									
HOME TELEPHONE # WORK TELEPHONE			CELLULAR TELEPHONE #						
EMAIL ADDRESS									
SURNAME OF SPOUSE			FIRST NAME OF SPOUSE			MIDDL	E NAME		
OPENING S	HARE & DEPOSIT AMOUNT \$	ENTRANCE FEE \$			PURPOSE OF ACCOUNT				
DOLLAR VALUE OF ANTICIPATED MONTHLY DEPOSIT \$						SOURCE OF FUNDS			
			20,000 per month PRIMARY SECONDARY			VEL OF EDUCATION			
PLACE OF EMPLOYMENT OR NATURE OF BUSINESS									
NAME OF EMPLOYER			OCCUPATION			l <u> </u>		☐ PART-TIME ☐ SEASONAL	
ADDRESS OF EMPLOYER							TEL	EPHONE #	
MEMBER REFERRING NEW APPLICANT									
NAME									
ACCOUNT#							REL	RELATIONSHIP	
CONTACT IN CASE OF NEED (Relative, close friend or associate NOT living with applicant)									
NAME							TEL	TELEPHONE #	
ADDRESS							REL	RELATIONSHIP	
APPLICA	ANT'S DECLARATION								
I agree to p	ay an entrance fee of three thousand five two hundred fifty United States Dollars L	hundred Liberian (L\$3 JS\$250.00 in voluntary	,500.00) and subscribe to shares as per the stipula	a maxin	num of up	totwo thousand United St	ates Do	ollars (US\$2,000.00) in permanent	