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## MEMBER'S BIO DATA UPDATE FORM

**Complete your Details in Capital Letters and attach the following Documents:**

1. Member's ID /passport copy.
2. Copy of next of kin's ID/ Passport or Birth Certificate in case of minors, for all next of kin to be registered on this form

### 1. MEMBER'S DETAILS

SURNAME:	MIDDLE:	OTHERS:
MR./MRS./DR./MISS./MS.	GENDER	DATE OF BIRTH (DD/MM/YY)
MARITAL STATUS	NATIONALITY	ID/ PASSPORT
EMAIL ADDRESS	PHYSICAL RESIDENCE	MOBILE PHONE NO
POSTAL ADDRESS	POSTAL CODE	TOWN

### 2. MEMBER'S BANK DETAILS

BANK NAME	BRANCH	ACCOUNT NO.
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### 3. EMPLOYMENT DETAILS (Members who are salaried)

NAME OF EMPLOYER	PIN NUMBER	PHYSICAL LOCATION
POSTAL ADDRESS	POSITION HELD	TOWN
TELEPHONE NUMBER	OCCUPATION	

### 4. BUSINESS DETAILS

(Members in Business)

BUSINESS NAME	BUSINESS PHYSICAL LOCATION
POSTAL ADDRESS	NATURE OF BUSINESS
APPROXIMATE MONTHLY INCOME (KSHS)	PIN NO

### 5. CONSTITUENCY (Please tick One)

AUDIT & ACCOUNTING CONSULTANCY FIRMS <input type="checkbox"/>	
ACCOUNTS IN TRAINING COLLEGE & KASNEB STUDENTS <input type="checkbox"/>	
INDUSTRY & COMMERCE COMPANY SECRETARIES <input type="checkbox"/>	
PUBLIC SECTOR, NGOs, OTHER CONSULTANTS, DIASPORA & OTHER REGIONS <input type="checkbox"/>	

### 6. DETAILS OF NEXT OF KIN

NEXT OF KIN'S FULL NAME	ID NUMBER	PHONE NUMBER	RELATIONSHIP	EMAIL ADDRESS

### 7. DECLARATION

I confirm that the information given above is true to the best of my knowledge. By signing on this form, I request you to update my account with the above, to supersede any other previously provided information.

Please sign in the space provided

Date: