Women in Agric Business Farmers Cooperatives

SOUTHWEST NIGERIA CHAPTER (Oyo • Ogun • Osun • Ondo • Ekiti • Lagos)

"Empowering Women, Cultivating Prosperity, Feeding the Nation"

OFFICIAL MEMBERSHIP REGISTRATION FORM

AFFIX 1 RECENT PASSPORT PHOTOGRAPH HERE

On paper, glue your photo here.
On a phone, send your photo as a separate picture.

Fill this in on your phone or computer, or print it and fill it in pen. Then send it on WhatsApp to **+234 803 255 2797**: the saved PDF, or clear photos of every page.

Form Serial No.:

WIA-SW / 20 [ ] / [ ]

Date of Application:

[ ] / [ ] / 20 [ ]

State Chapter (Southwest):

☐ Oyo ☐ Ogun ☐ Osun ☐ Ondo ☐ Ekiti ☐ Lagos

Local Govt. Area (LGA):

[ ]

SECTION A APPLICANT PERSONAL & DEMOGRAPHIC DETAILS

1. Surname (Family Name):

[ ]

2. First Name:

[ ]

3. Middle / Other Name(s):

[ ]

4. Date of Birth & Age Group:

DOB: [ ] / [ ] / [ ]

☐ 18-35 ☐ 36-50 ☐ 51+

5. Marital Status:

☐ Single ☐ Married ☐ Widowed ☐ Divorced

6. Primary Phone / WhatsApp No.:

[ ]

7. Email Address (if available):

[ ]

8. Highest Educational Level:

☐ Non-Formal ☐ Primary ☐ Secondary ☐ Tertiary

9. National ID (NIN) / Voter's Card No.:

[ ]

10. Residential Address (House No., Street, Landmark):

[ ]

11. Town / Village / Ward:

[ ]

12. State of Origin:

[ ]

13. LGA of Origin:

[ ]

14. Languages Spoken:

☐ Yoruba ☐ English ☐ Pidgin

☐ Other: [ ]

SECTION B AGRIBUSINESS VALUE CHAIN & FARMING PROFILE

15. Primary Area(s) of Agribusiness Involvement (Tick all that apply):

☐ Crop Farming ☐ Livestock / Poultry / Fishery ☐ Agro-Processing & Value Addition ☐ Farm Input Supply

☐ Produce Aggregation & Marketing ☐ Export / Packaging ☐ Agro-Logistics / Storage

☐ Other: _____

16. Major Crops / Livestock / Agro-Products (Tick primary commodities):

☐ Cassava (Garri/Fufu/Starch) ☐ Cocoa ☐ Oil Palm ☐ Maize ☐ Rice ☐ Yam ☐ Plantain/Banana

☐ Vegetables (Tomato/Pepper/Leafy) ☐ Cashew ☐ Poultry/Eggs ☐ Catfish/Aquaculture ☐ Goat/Piggery

☐ Shea/Honey

17. Farm / Agribusiness Enterprise Name (if registered):

18. Farm Settlement / Processing Centre Location & LGA:

19. Farm Size (Hectares/Acres) or Production Capacity:

☐ <1 Ha ☐ 1–5 Ha ☐ 5+ Ha

Est. Size/Capacity: _____

20. Years in Agribusiness & Land Tenure Status:

Exp: _____ Yrs

Land: ☐ Owned ☐ Leased ☐ Family/Communal

SECTION C COOPERATIVE FINANCIAL COMMITMENT, NEXT OF KIN & REFEREES

21. Proposed Monthly Thrift Savings (₦):

₦ _____ / Month

22. Initial Share Capital Units Subscribed:

_____ Units @ ₦ _____ = ₦ _____

23. Primary Support Needed:

☐ Credit/Loan ☐ Inputs ☐ Training ☐ Market

24. Bank Name (for Dividends/Loans):

25. Account Name (Must match Applicant):

26. 10-Digit NUBAN Account Number:

27. Next of Kin Full Name:

28. Relationship & Phone Number:

Rel: _____ Tel: _____

29. Next of Kin Residential Address:

30. Referee 1 (Name & Membership No.):

31. Referee 1 Phone & Signature:

Tel: _____ Sign: _____

32. Referee 2 (Name, Phone & Signature)

Name & Membership No.:

Phone & Signature:

Tel: _____ Sign: _____

SECTION D MEMBER DECLARATION & ATTESTATION

I, _____ ,

hereby apply for admission into the Women in Agric Business Farmers Cooperatives (Southwest Nigeria). I affirm that all information provided above is true and accurate. I pledge to abide by the Cooperative Bye-Laws, attend regular meetings, fulfill my monthly thrift savings and share obligations, and uphold the spirit of mutual support and agricultural excellence.

Applicant's Signature / Right Thumbprint:

Your details are used only to process your membership.

On paper, sign here. On a phone, type your full name.

Date of Declaration:

__ / __ / 20 __

SECTION E FOR OFFICIAL USE ONLY (EXECUTIVE COMMITTEE)

Application Status:

☐ Approved ☐ Deferred ☐ Declined

Assigned Cooperative Membership No.:

WIA / SW / _____ / _____

Cluster / Zone / Farm Settlement Group:

Registration Fee Paid (₦) & Receipt No.:

₦ _____ Rcpt: _____

Share Capital Paid (₦) & Receipt No.:

₦ _____ Rcpt: _____

Date Verified & Admitted:

__ / __ / 20 __

Chapter Chairperson (Name, Sign & Date):

General Secretary (Name, Sign & Date):

Financial Secretary / Treasurer (Sign & Date):