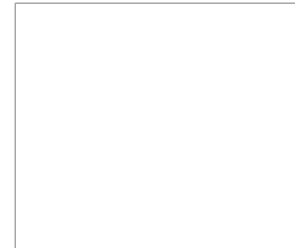




NATIONAL LIVESTOCK AND BUTCHERS COOPERATIVE SOCIETY LIMITED
Membership Registration Form



Attach Passport
Photograph

1. **FullName** _____

2. **Phone Number** _____

3. **Email Address** _____

4. **Occupation** (pls tick as appropriate)

- Butcher Livestock Trade Meat Seller Poultry Farmer Abattoir Worker
- Feed Seller Veterinary Drug Vendor Livestock Tra Suya Vendor Other

5. **Amount Paid** _____

6. **Attach Proof of Payment to this form**

7. agree to abide by the cooperative bylaws.

Signature _____ **Date** _____

Registration / Membership ID: _____ (Official use only)