



Kenya Association of Investment Groups

APPLICATION FORM FOR MEMBERSHIP

View Park Towers 15th Floor, P.O.Box: 48525 - 00100 Tel: (020)-351 7967 /342 120 Fax: (020) 342 108 E-mail: admin@kaig.org

ORDINARY MEMBERSHIP

Please print

INVESTOR GROUP NAME.....

YEAR OF FORMATION.....

NUMBER OF MEMBERS[]

CURRENT MONTHLY CONTRIBUTION(GROUP).....

CURRENT ASSET VALUE(APPROXIMATE).....

OFFICIAL ADDRESS.....

TOWN / CITY.....CODE.....COUNTRY.....

TELEPHONE (LANDLINE).....MOBILE.....

Kindly indicate your mode of registration

- Limited Company
- Partnership
- Society
- Business Name

NAME AND ADDRESS OF REPRESENTATIVES*

1. Chairperson.....P.O.Box.....Code.....

Landline.....Cell.....Email.....

2. Secretary.....P.O.Box.....Code.....

Landline.....Cell.....Email.....

3. Treasurer.....P.O.Box.....Code.....

Landline.....Cell.....Email.....

*Persons to be contacted for all communication with the group

Please indicate in percentages your groups current approximate asset allocation in;

a) Equities and Money Market %

b) Property %

c) Offshore %

d) Other (Please describe) %

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