



## ACCOUNT REACTIVATION FORM

Date: \_\_\_\_\_ Member Name:   
Member No.:

Please reactivate my/our account whose details have been provided above.

I/We wish to reactivate my account by:

Depositing cash Kshs:       Withdrawing cash Kshs:

### Contact Details:

Postal Address:       Postal Code:   
City/Town:       Country:       E-mail:   
Telephone No:       Mobile Telephone No:

### Signatories

Customer's Signature: \_\_\_\_\_ ID Card No:   
Customer's Signature: \_\_\_\_\_ ID Card No:   
Customer's Signature: \_\_\_\_\_ ID Card No:   
Customer's Signature: \_\_\_\_\_ ID Card No:

### For Official Use Only

Reasons for reactivation: \_\_\_\_\_

Verified by: \_\_\_\_\_ [ Append Signature]

Authorised by: \_\_\_\_\_ [ Append Signature]