



Affix Passport Size Photograph

STL TARGET EVENT

Surname.....
Mr. / Mrs. /Ms. /Miss. (Please Specify

Other Names.....

Date of Birth

State Of Origin

L. G. A

Gender

Marital Status

Postal Address

Residential Address

.....
E-Mail

Office Address

.....

Telephone Nos:

Mobile.....Office.....Home.....

Occupation

Employer.....

Next of Kin

Affix passport size
photograph of next
of kin

Address of Next of Kin

.....

Relationship with Next of kin.....

Telephone Nos. of Next of Kin:

Mobile..... Office..... Home.....

Period of Investment: Tick

- 1 Years
- 2 years
- Others (Please Specify)

Payment Options: Tick

- Cheque
- Bank Draft
- Bank Transfer
- Bank Deposit
- Standing Order Instruction

Signature

Date.....

STANDING ORDER INSTRUCTION SUBSCRIBERS' ONLY

I hereby authorize
..... Bank Plc to debit my account No monthly, with a sum of
N..... and credit STL Trustees Skye Bank account No. **1770533533**
from...../...../201.... until and unless I give contrary instructions in this regard.

Signature

Date.....