



**BOTTLERS EMPLOYEES  
SAVINGS AND LOAN  
ASSOCIATION INC.**

**MEMBERSHIP APPLICATION  
FORM**

7<sup>th</sup> Floor, ACE Building, Dela Rosa corner Rada Street, Legaspi Village, Makati City  
Tel. Nos. 892-4146; 752-4546; 752-4547; 841-0579;  
Telefax 892-4146; CP# 0917-5863866 email: info@besala.com.ph

NAME:		(1x1 or 2x2 picture)
<small>(First Name)</small>	<small>(Middle Name)</small>	
EMPLOYEE NUMBER:		
PLANT / SALES OFFICE:		
POSITION:		
DATE OF PERMANENCY:		
PERMANENT ADDRESS:		
PRESENT ADDRESS:		
NAME OF FATHER:		SOURCE OF FUNDS:
NAME OF MOTHER:		BPI PAYROLL ACCOUNT NO.:
CIVIL STATUS:		EMAIL ADDRESS:
NATIONALITY:		TIN:
NAME OF SPOUSE:		SSS NO.:
OFFICE TEL. NO.:		DATE OF BIRTH:
HOME TEL/MOBILE NO.:		PLACE OF BIRTH:

Name of Children / Dependents	
1.	4.
2.	5.
3.	6.

*To BESALA*

*I hereby agree to be governed by the Association's rules and regulations in connection with my membership. Please recognize the following signatures in all my transactions with the Association.*

*All information shall be used by the Association for legitimate purposes specifically for membership and shall be processed by authorized personnel in accordance with the Data Privacy Policies of the Association.*

*I hereby allow/authorized Bottlers Employees Savings and Loan Association Inc. to use, collect and process the information for legitimate purposes specifically for membership and allow authorized personnel to process the information*

*Very truly yours,*

**Specimen signatures:**

1.	2.	3.
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<input type="radio"/> With Face-to-Face contact with Site HR <input type="radio"/> With Certificate of Employment	<b>Verified by:</b>  _____ <b>BESALA Account Analyst</b>	<b>Approved by:</b>  _____ <b>BESALA Approving Officer</b>
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**\*Please attach photocopy of Company ID (Back-to-Back), latest employee credit profile with date of permanency and Certificate of Employment\***