

Application for Membership

Clarence Arcade, Stamford Street, Ashton-under-Lyne, OL6 7PT

Cash Box Credit Union is Authorised by the Prudential Regulation Authority and Regulated by the Financial Conduct Authority and the Prudential Regulation Authority FRN 213528

I hereby apply for membership of Cash Box Credit Union and declare that the information I have given below is true and correct. If my application is accepted I agree to abide by the Credit Union's policies and procedures. ***I understand that a one-off, non-returnable joining fee of £2.00 is payable.***

Mr / Mrs / Miss / Ms / Master Surname.....

First name(s).....

Address.....

..... Postcode.....

Home Tel..... Mobile

Email

National Insurance Number..... Date of birth.....

Country of Nationality Country of Residency

Country of Birth Place (town/city) of birth

I have been given a copy of the Financial Services Compensation Scheme Information Sheet I confirm that I am ONLY resident in the UK for tax purposes YES NO

If NO, please provide your Tax Identification Number (TIN)

Please list all the countries and TIN where you are resident for tax

Signed..... **Date**.....Nominated Person/Next of Kin (in the event of my death)

I..... Hereby nominate.....

of (address of nominee)

As the person to whom there shall be transferred such property in the Credit Union (whether in shares, loans or deposits or otherwise, including Life Savings Insurance Plan) that may be mine at the time of my death. I understand that the maximum amount provided for under nomination is £5,000 and any residual balance in my account shall be paid to my legal Personal Representative(s).

Their relationship to you..... Their contact no.....

Signed..... **Date**.....**Witness**..... **Date**.....

Name of Witness (not nominee).....

How did you hear about Cash Box

Are you interested in a Rent Direct Account? YES / NO

I wish to make payment via Passbook / Standing Order / Payroll Deduction *

If you are an employee of Tameside MBC, Tameside Sports Trust, CAB, CVAT, Tameside Teachers, New Charter Housing Trust, NCHT Academy and wish to pay into Cash Box by payroll deduction, please complete this section.

I wish to make payments Monthly/4 Weekly* to be allocated as follows:

Cash Box Savings (Shares)	£.....
Engage Account	£.....
Christmas Shares	£.....
Total Payroll Deduction	£.....

Please commence deductions from the first available pay date and continue until I give written notice, via Cash Box, of any changes.

Name Employee Number

Work Location or Department..... Employer.....

I confirm that I wish to receive future Christmas club funds direct into my bank account as detailed bellow. I am aware that these details will remain in place until amended by me in writing.

Signed..... **Date**.....

Name of Bank or Building Society

Branch

Sort Code:

--	--

 -

--	--

 -

--	--

Account Number:

--	--	--	--	--	--	--	--

Roll/Ref no (if building society A/c) -----

Office use only: (please initial and date)

ID seen (please state)

.....

Photocopies taken Yes / No * Application accepted Yes / No *

Reason for non-acceptance

Payroll Deduction Order / Standing Order Mandate

Input onto system Date PDO sent to Payroll

Welcome letter issued