Membership Application Form

Main Office: Harlequin Court, 44a Windsor Road, Neath, SA11 1LZ
Email: admin@celticcreditunion.co.uk **Telephone Number:** 0333 006 3002

For Office Use Only

Membership Number Allocated:		Membership Fee Paid:	Yes / No
Passbook Issued:	Yes / No	Identification Verified:	Yes / No

Terms and Conditions of Membership

A minimum deposit of £3.00 is required to open an account.

- £1 is deducted as a membership fee.
- A minimum of £2 is required to be in your savings account to keep the account active.
- A monthly service fee of 50p will be deducted at the beginning of each month.

With the application you will need to provide valid photographic identification, either a:

- Current Driving Licence
- Valid Passport

And at least one of the following. If you do not possess photographic identification, then you must provide THREE of the following: (*The documents must be dated within the last 3 months)*

- Utility Bill (not a mobile phone statement)
- An Official Letter with your name and address (e.g., Benefits Agency, HMRC, Local Authority/Housing Association correspondence, NHS)
- Pay slips/P45/P60
- Bank/Building Society Statements/Credit Card Statement
- Mortgage/Rental Agreement
- Other forms of identification maybe accepted, please ask.

Proof of your National Insurance number will be required.
This can be found on Payslips, Benefit Agency Letters, Pension Letters or National Insurance Card.

Dormancy
Your account will become dormant after 10 years of inactivity. Dormant accounts will be subject to an annual dormancy fee of £5.00.

Personal Details *(please complete in block capital letters)*

Title: Mr / Mrs / Miss / Ms / Other:		**Forename:**	
Middle Name(s):		**Surname:**	
Nationality:		**Marital Status:**	
Date of Birth:		**NI Number:**	
Telephone Number:		**Mobile Number:**	
Email Address:			
Current Address:			
		Post Code:	
Have you lived at your address for less than 3 years? *(Please circle)*		YES	NO

Personal Details *(Continued)*

Previous Address:			
		Post Code:	
Country of Residence:			
Country of Birth:			
Payment Method:	Standing Order - Payroll - Walk In/Cash		
Employment Status:	Employed / Self Employed / Unemployed		
Occupation:			
Company / Organisation:			

Beneficiaries *(Please complete in block capital letters)* - **You can have more than 1 beneficiary.**

In the event of my death, I nominate the following as the person to whom shall be transferred such property in the Credit Union as may be mine at the time of my death, whether in shares or otherwise.

Forename:		**Surname:**	
Address:			
		Post Code:	
Contact Number:		**Membership Number:**	
Relationship to you:		**Date of Birth:**	

Staff Only **(Must be Completed)**

*Has the member been put under any pressure completing **Beneficiary** section* ***Yes*** ☐ ***No*** ☐

Tax Residency for the purposes of the Common Reporting Standard

Please circle your answer.

Are you a Tax Resident in another country?	YES	NO
TIN Number		

Supplementary Membership Application Information

- *All Credit Unions are obliged to comply with legislation that the Government has enacted to combat money laundering and the financing of terrorism.*
- *In accordance with this legislation, we are required to obtain answers from all our members to the following Questions. We would be grateful if you would tick the relevant boxes.*

Please circle the relevant box to answer the following Questions.

Are you a Politically Exposed Person (PEP) or are you a relative or close associate (RCA)?	YES	NO
Are you the beneficial owner of the funds in your shares account?	YES	NO

Marketing Preferences

As part of improving our services to you, from time to time we would like to inform you of goods, services, competitions and/or promotional offers available from us. We may wish to contact you by different means when sending such marketing communications.

Please confirm, by indicating below, the methods by which you give written consent to be contacted.

POST	
EMAIL	
TEXT	
TELEPHONE	

Declaration

I hereby apply for membership and agree to abide by the rules of the Credit Union. I declare that the information given by me on this form are to the best of my knowledge and belief correct and complete. I understand that Celtic Credit Union will process my data in accordance with my rights under the Data Protection Act 1998 and GDPR 2018.

How we use your information

We will use your personal data for the purposes of managing your accounts with the Credit Union. Your personal details will be treated confidentially and in accordance with our Privacy Policy. Our Privacy Policy is available on request and online at www.celticcreditunion.co.uk/policies-and-procedures/

Applicants Signature:	
Date Signed:	