



# Membership & Current Account Application Form



## Your Personal Details

First name		Middle Name		Surname	
Title		Existing Member	Yes <input type="checkbox"/> No <input type="checkbox"/>	Membership Number (where appropriate)	
Male <input type="checkbox"/>		Female <input type="checkbox"/>			
N I Number		Nationality		Date of Birth	
Current Address					
					Postcode
Home Tel.		Mobile Tel.			
Residential Status	Owner outright <input type="checkbox"/>	Owner with mortgage <input type="checkbox"/>	Living with parents <input type="checkbox"/>	Rented - furnished or unfurnished (please delete) <input type="checkbox"/>	Other <input type="checkbox"/>
Time at current address		Years	Months	<i>If less than three years please give previous address</i>	
Previous address					
					Postcode
Time at previous address		Years	Months	Number of Dependants under 4	Over 4
Marital Status	Single <input type="checkbox"/>	Married <input type="checkbox"/>	Co-habiting <input type="checkbox"/>	Divorced <input type="checkbox"/>	Widowed <input type="checkbox"/>
Email				Password – Must be completed	
Next of Kin				Relationship	
Next of Kin's Address					
					Postcode
Have you a previous name within last 5 years? If yes please state					
How did you hear about this Credit Union?					

## Your Income /Employment details–Credit Union Current Account only

Name and Address of your Employer					
					Postcode
Work Tel		Job Title			
Full-time <input type="checkbox"/>	Part-time <input type="checkbox"/>	Self-employed <input type="checkbox"/>	Unemployed <input type="checkbox"/>	House person <input type="checkbox"/>	Retired <input type="checkbox"/> Student <input type="checkbox"/>
Nature of Business if self-employed					
Time with employer /self-employed		Years	Months		
Benefits				Amount	
Benefits				Amount	
Gross Annual Income		Monthly Net Income			

## Your Bank Details *(Please fill in your main bank account details if applicable)*

Account Name														
Sort Code						Account Number								
Building Society Roll Number														
Bank /Building Society Name														
Bank /Building Society Address														
												Postcode		
Bank /Building Society Tel.						Time in Bank /Building Soc.				Years		Months		
Credit Cards held	None		VISA		MasterCard		American Express		Other					
Cheque Guarantee Card held?		Yes			No									

## Declaration To Join Llandudno & District Credit Union

### Your Consent

It is important that you read and understand the section entitled Shared Information (including the parts about credit reference and fraud protection agencies) on the 'Guidelines to Opening a Credit Union Account' and in the terms and conditions (A condensed guide to the use of your personal information by ourselves and at Credit Reference and Fraud Prevention Agencies. By signing this application below you agree that we can use your information in this way. In accordance with data protection requirements you have the right of access to your information held by the Credit Union on payment of fee.

### Declaration and Data Protection

I declare that the information I have given on this form is true to the best of my knowledge.

- I wish to apply for membership of, and agree to abide by the rules of Llandudno & District Credit Union Ltd.
- I have read the Terms and Conditions of the Credit Union Current Account and I accept them

I authorise you:

- To open an account in my name & to process the information I have provided you with

To honour my signature as shown below

I wish to apply for membership (Savings Account)	Signature		Date	
--	-----------	--	------	--

## Signature To Open Current Account

**I understand that there may be a small weekly charge for operating a Credit Union Current Account and this will be deducted from my Credit Union Current Account on an ongoing basis (See account tariff information sheet for details)**

I wish to apply for a Current Account	Signature		Date	
---------------------------------------	-----------	--	------	--

## Signature To Open Christmas Saver Account

**I understand that there are no withdrawals on the Christmas Savers Account from January 1st to October 31st**

I wish to apply for a Christmas Saver Account	Signature		Date	
---	-----------	--	------	--

## Other Services Available – Please tick the box below if you are interested

Paying wages and/or benefits into an account		Child Trust Funds		Direct Payroll Deductions from your wages into an account (CCBC/NHS/North Wales Housing only)	
--	--	-------------------	--	---	--

## Official Use Only

Proof of ID		Application No		ATM Card	
Proof of Residency		Account Number		Debt Card	
Processed By		Date		Declined	