



Application for Membership

Member No.
(HBCU/office use only)

Full Name: **Title:**

Address:

.....

..... **Postcode:**

Telephone: **email:** **D.o.B:**

(if any) (if any)

I am associated with: **Church**
and/or related to and live in the same house as:

who is currently a member of Handsworth Breakthrough Credit Union.

I apply to join Handsworth Breakthrough Credit Union Limited, and agree

1. to abide by the Rules Rule Book available on request
2. to notify the Credit Union of all changes of address and other details
3. to your holding my details on computer registered under the Data Protection Act

Signed: (applicant's signature) **Date:**/...../.....

Proposed by: **an existing member, OR a church minister, OR staff,**
OR officer of another credit union, OR staff member of a credit union office/shop (circle option)

Confirmation of Name and Address: (required by the Money Laundering Regulations Act, 1994)

Evidence of Identity¹: No:

Evidence of Address²:

¹ passport, bus pass, I.D. card etc - something with your **name** and **photograph**
² gas bill, library ticket, official letter addressed to you etc - something with your **name** and **address**

Checked by: (Proposer)

Declaration of future actions, to be taken in the case of account holder's death:

I direct you to deal with my following Personal Representative concerning disposing of all shares and other sums due to me from the Credit Union.
(N.B. the nominee must be a living adult individual, and you may change this at any time)

Full name:

Full address:

Signed: (member) **Member No.:** **Date:**/...../.....

Witness: (N.B. named witness must be an adult who is NOT the nominee)