

INSTRUCTIONS

1. Fill in the following 2 pages of the Application Form
2. Take the application form to any of the Warrington Credit Union collection points (including the Shop) shown on the web page where you downloaded this form
3. Acceptable items of identification: **please bring one item from each group**. At least one document must show your current address and at least one document must show your date of birth.

Group 1	Group 2
Valid passport(any nationality) UK Driving Licence (photo card or paper) Valid photo identity card (EU countries only) Original UK Birth Certificate (issued within 12 months of date of birth) (full or short form accepted) UK Firearms licence Older Persons Concessionary Bus Pass Concessionary Travel Pass for Disabled People Work Identification Pass containing a supporting picture	Marriage Certificate Non-original UK birth certificate (issued after 12 months of date of birth) (full or short form) P45/P60 statement ² Bank or Building Society statement ¹ Utility bill (electricity, gas, water, telephone - inc. mobile phone contract/bill) ¹ Valid TV licence Credit card statement ¹ Store card statement ¹ Mortgage statement ¹ Valid insurance certificate Certificate of British nationality British work permit/visa ² Work permit/visa ² Correspondence or document from: Employment Service, Benefits Agency, Inland Revenue, Local Authority ² Financial statement (e.g. pension, endowment, ISA) ² Valid vehicle registration document Mail order catalogue statement ¹ Court summons ² Valid NHS card Addressed payslip ¹ National Insurance number card or correspondence documentation confirming the allocation of a National Insurance Number Exam certificate (e.g.: GCSE, NVQ) Connexions card Certificate of British nationality Work Identification Pass containing a supporting picture

¹ items must be less than 3 months old

² items issued within last 12 months

WARRINGTON CREDIT UNION APPLICATION FOR MEMBERSHIP



Membership Number Allocated: _____

Surname / Family Name		Title:	
Other name(s)			
Previous names (e.g. maiden name)			
Address			
Post Code		How many years at this address?	
Previous address (if less than 3 years at current address)			
Date of Birth		Work Phone	
Home Phone		Mobile Phone	
Email address			
Employers address	Only required if you work in Warrington but do not live in Warrington		
UC/NI/CB Reference	Only required if you are using the reference for deposits		

We will use Post, Email and Phone to manage your account.

We may wish to contact you by email from time to time with offers of services you might be interested in. If you do not wish to receive such offers, tick this box We will never give your details to third parties.

Important - Your Personal Information	
	<p>Credit decisions and also the prevention of fraud and money laundering</p> <p>We may use credit reference and fraud prevention agencies to help us make decisions. A short guide to what we do and how both we and credit reference and fraud prevention agencies will use your information is detailed in the leaflet called: A condensed guide to the use of your personal information by ourselves and at Credit Reference and Fraud Prevention Agencies. If you would like to read the full details of how your data may be used please visit our website at www.warringtoncreditunions.co.uk or phone 01925 652929 or ask one of our staff.</p> <p>By confirming your agreement to proceed you are accepting that we may each use your information in this way.</p>
	<p>Data Protection Act: In accordance with the principals of the Data Protection Act 1990 we will use your personal details for the purpose of managing your account with the Credit Union. Your personal details will be treated confidentially and will only be shared with other agencies for the purpose of credit referencing and debt recovery, audit and where required legally.</p>

I hereby apply for membership of and agree to abide by the rules of WARRINGTON CREDIT UNION LIMITED, and declare that the information given by me on this form is true and correct to the best of my knowledge and belief.
I agree to pay the current membership fee on joining and as a deduction from my shares on or after 1 October in each subsequent year.

Tick this box if you want the current joining fee to be deducted from your first deposit.

Applicant's signature _____ Date: _____

Form of Nomination

I _____ of _____

_____ a member of Warrington Credit

Union Ltd hereby nominate _____

of _____

_____ as the person to whom there shall be transferred at my decease such property in the credit union as may be mine at the time of my decease, whether in shares or otherwise.

Relationship to you _____

Contact Telephone Number _____

Dated this the _____ day of _____ 20_____

Applicant's Signature _____

Witness _____

(The witness shall not be the nominee)

For office use:

IDENTIFICATION

1 _____ Seen by _____ Doc Reference _____

2 _____ Seen by _____ Doc Reference _____

Membership Number: _____