

# NEWCU Application Form



<b>Membership No.:</b>  
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## Section One – Your details

Title..... First Name.....

Last name..... Telephone.....

Address.....

..... Town.....

Postcode..... Date of Birth.....

**Signature..... Date.....**

Proposed by ..... Seconded by .....

## Section Two – Beneficiary

(If you wish to divide your shares equally between more than one person, please fill in a separate form for each person.)

*I, being a member of the North East Warrington Credit Union Ltd. nominate the following person as my beneficiary, to receive any money due to me under the Life Insurance terms (if applicable) providing that I have fulfilled any outstanding loan to my agreement. I reserve the right to change the beneficiary named here.*

### Beneficiary details

Title..... First Name..... Middle Name.....

Last name..... Tel. No. ....

Address.....

.....

Town..... Postcode.....

Date of Birth..... NEWCU memb. no. (if applicable).....

**Applicant signature..... Witness signature.....**

Applicant (print name)..... Witness (print).....

Note: Your membership is provisional until accepted by the Board of Directors. If your application is rejected, you will be notified and any money returned to you.

**Section Three – Employment details**

Are you in employment?      Yes                       No

If yes, what is your job title? .....

Name and address of employer .....

..... Tel. Number .....

**Section Four** (to be completed by NEWCU collector)

Account opened at ..... Opening deposit £ .....

Collection point where member will pick up their account book .....

**Proof of identity seen:**

Passport                       Driving licence                       Document with photo

Letter from doctor, solicitor, minister or teacher

Other (give details) .....

Above document examined by NEWCU officer:

(signature) ..... (print name) .....

**Proof of address seen** (bills and statements must be less than 3 months old):

Rent book                       Utility Bill                       Bank/Building society statement

Driving licence (not used above)                       Council Tax Bill

Other (give details) .....

Above documents examined by NEWCU officer:

(signature) ..... (print name) .....

**Section Five** (to be completed by NEWCU Head Office)

Application approved    Yes                       No     Membership No. .... Date ...../...../.....

Signed by Chairperson on behalf of the Board of Directors .....

Date passbook issued ...../...../.....    Issued by .....

Date account closed ...../...../.....    Closed by .....