### MID-TYRONE CREDIT UNION LIMITED

## **MEMBERSHIP APPLICATION FORM**

## SENIORS

#### WWW.MIDTYRONECU.COM

OFFICE USE ONLY

# I HEREBY APPLY FOR MEMBERSHIP AND AGREE TO ABIDE BY THE RULES OF MID-TYRONE CREDIT UNION LIMITED

ACCOUNT NO:	
PHOTO ID (TYPE):	
ADDRESS ID (TYPE):	
NEW MEMBERS PACK:	Y / N

FULL NAME:	DATE OF BIRTH: / /
ADDRESS:	POSTCODE:
TELEPHONE:	NI NUMBER:
EMAIL ADDRESS:	OCCUPATION:
APPLICANT SIGNATURE:	DATE: / /

BENEVOLENT SCHEME FEE (£10) (APPLICABLE 01MAY > 310CT)	
JOINING FEE (£2)	
FIRST DEPOSIT	
TOTAL	

MID-TYRONE CREDIT UNION LIMITED IS AUTHORISED BY THE PRA AND REGULATED BY THE FCA AND THE PRA :: FRN 574115

	DESIGNATION OF	BENEFICIAI	RY		
1,		ON BEC	OMING A MEMBER	OF MID-TYRONE CRED	IT UNION
HEREBY DESIGNATE			OF RELATIONSHIP		
OF ADDRESS AS M				AS MY	
BENEFICIARY, TO REC	IVE ANY MONEY DUE TO ME FROM MID-TY	RONE CRE	DIT UNION, PROVID	ED THAT I HAVE FULFI	LLED MY
AGREEMENT ON ANY OUTSTANDING LOAN I HEREBY RESERVE THE RIGHT TO CHANGE THIS BENEFICIARY AT ANY TIME.					
APPLICANT SIGNATURE:			DATE:	/ /	
OFFICER SIGNATURE:			DATE:	/ /	



UNDER THE PROCEEDS OF CRIME ACT 2002 (AS AMENDED) AND THE MONEY LAUNDERING REGULATIONS 2007, ALL FINANCIAL INSTITUTIONS AND OTHER DESIGNATED BODIES, INCLUDING CREDIT UNIONS, ARE LEGALLY OBLIGED TO DETER, DETECT AND ASSIST IN THE PREVENTION OF POSSIBLE MONEY LAUNDERING AND TERRORIST FINANCING ACTIVITY. YOUR ASSISTANCE AND CO-OPERATION IN THIS MATTER IS GREATLY APPRECIATED.

MEMBERS NAME:	ACCOUNT NO:	
PURPOSE  MAIN REASON FOR OPENING ACCOUNT (E.G. SAVE, BORROW, BOTH)		
ORIGIN  ORIGIN OF MONEY  (E.G. SAVINGS, SALARY, BENEFITS, PENSION ETC)		
TURNOVER  INTENDED FREQUENCY AND AMOUNT OF LODGEMENTS		
SOURCE  SOURCE OF OVERALL WEALTH (E.G. JOB, INHERITANCE, INVESTMENTS ETC)		

PLEASE NOTE THAT THE INFORMATION PROVIDED BY YOU ON THIS FORM WILL BE REVIEWED AT LEAST ONCE PER YEAR TO ENSURE THAT YOU ARE OPERATING YOUR ACCOUNT IN LINE WITH YOUR STATED EXPECTATIONS. BY SIGNING THIS DECLARATION, YOU ARE ACCEPTING THAT THE CREDIT UNION MAY CLOSE YOUR ACCOUNT IF IT IS NOT BEING OPERATED BY YOU AS INTENDED.

APPLICANT SIGNATURE:	DATE:	/ /
OFFICER SIGNATURE:	DATE:	/ /