

Danum Credit Union Ltd

Independent Financial Co-Operative

Adult Savers: Application For Membership

Please complete both pages of this form and hand it to your local Danum Credit Union representative along with proofs of identity and address (please see section at bottom of page).

Account No: _____

Full Name: _____

Address: _____

Post Code: _____

Telephone No: _____

Date of Birth: _____ National Insurance No: _____

Occupation: _____

Name of Employment: _____

Address of Employer: _____

Post Code: _____

IDENTIFICATION NEEDED TO OPEN AN ACCOUNT

Please bring one original document from each section.

Documents you can use to confirm your identity: original documents only

- Current signed passport
- Current UK driving licence or a blue disabled driver's pass
- EU member state ID card
- Residence permit (issued by The Home Office to E.U. nationals)
- Benefit book or original letter from Benefits Agency (e.g. Pensions service, Jobcentre Plus, Child Benefit office, etc)

Documents you can use to confirm your home address: original documents only

- Bills - recent utility or council tax bills
- Official letters - UK solicitor confirming home purchase, Benefits Agency
- Recent statements - bank, building society, credit union, mortgage
- Other - council rent card, tenancy agreement

What if I don't have any documents I can use?

There are additional procedures in place to help customers who cannot provide the preferred documents. You can talk to a member of staff about the sorts of documents you can produce.

If unsure please contact the office.

Beneficiary of Account

I _____ being a member of Danum Credit Union Limited,
do hereby nominate: _____
of address: _____

Post Code: _____

to be the beneficiary of any money due under the Life Insurance of Danum Credit Union Ltd. I understand I must have kept up to date with all loan payments.

Relationship to account holder: _____

**I apply to join Danum Credit Union Ltd and agree to abide by the rules.
I declare that to the best of my knowledge, the information given on this form is true and correct.
I promise to notify any changes to the above information.**

Signature: _____

Date: _____

Witness Signature: _____

Date: _____

OFFICE USE ONLY

Passport Driving Licence Birth Certificate Bus Pass

Letter or statement from a person in a position of responsibility
(eg. teacher, vicar, social worker or doctor)

Other Document (identify): _____

Tick the relevant boxes when photocopies have been made.

Application Accepted: _____

Entered in Members' Register: _____