

# Cornish Community Banking

A Trading Name of Cornwall and The Isles of Scilly Credit Union Limited

Member No.:

## Membership Application Form

Surname.....

Forename(s).....

Tel No..... Date of birth.....

Address.....

Post Code..... NI Number.....

Email address.....

Proof of identity (e.g. passport, driving licence) and evidence of current address (e.g. utility bill, rates demand, benefit book) must be produced at the office. If no documentary evidence is available a letter from a person of responsibility may be acceptable.

Proof of identity .....

Evidence of current address.....

Are you Self employed/Unemployed/Retired/Student/Employed (delete as necessary)

Name and address of employer .....

Works/payroll number.....

If your employer agrees we can arrange for payroll deduction into your account with us.

*Cornwall and The Isles of Scilly Credit Union Ltd (CISCU) is registered under the Data Protection Act 1998. The information you provide will be used solely for the purposes of membership of Cornish Community Banking/CISCU*

I hereby apply for membership of Cornish Community Banking and agree to abide by its rules. I declare that the information given by me is true and correct to the best of my knowledge. I understand CCB does not provide financial advice.

Signature ..... Date .....

Your credit union always needs volunteers to ensure that it represents the community fully and gives the best possible service. If you are willing to volunteer some time to the credit union, no matter how little, please tick the box.

Where did you hear about us?.....

Approved by (signature)..... Mem. No. ....

Checked by (signature)..... Mem. No. ....

## Form of nomination (in case of death)

I, \*..... a member of Cornish Community Banking. (\*Insert name)

of Address.....

hereby nominate

1.....

of Address.....

2.....

of Address.....

as the person(s) to whom there shall be transferred at my decease such property in the Cornwall and The Isles of Scilly Credit Union Ltd as may be mine at the time of my decease, whether in shares or otherwise.

Dated this ..... day of ..... 20.....

Any special instructions.....

Member signature .....

Witness signature.....

Witness full name.....

Witness address.....

If any of the above is altered, please contact Cornish Community Banking to ensure that up to date information is held on file.

Cornwall and The Isles of Scilly Credit Union Ltd. Registered Office: 11A Frances Street, Truro, TR1 3DN. Registration number 213699. Tel: 0800 0556873