



APPLICATION FOR MEMBERSHIP OF SOLENT CREDIT UNION JUNIOR SAVINGS CLUB

Under 16 years old

Applicants Full Name:

Full Address:

..... Post Code:

Telephone No.: Date of Birth:

E-mail Address:

If you do not live within the SO postal district, which church do you attend?

How did you hear about the Savings Club?

I hereby apply for membership of the Solent Junior Savings Club and declare that the information given by me on this form is true and correct to the best of my knowledge and belief.

Applicants Signature:..... Date:

I confirm that the above named Junior Saver's address and date of birth given above are as shown on school / surgery records. This is required by the F.S.A. School or G.P.'s stamp and signature

Signature.....

Date

If the above section is not completed the birth certificate must be produced along with any different documentation that confirms the junior savers address.

NOTE: The Parent / Guardian information overleaf must be completed.

J02 –October 10 (W)

P.T.O

FORMS OF IDENTITY

Solent Credit Union requires proof of address and I.D. for the parent / guardian.

This can be: -

- Passport
- Driving Licence
- Utility bill (dated within the last 3 months)
- Bank / Building Society / Credit card Statement
- Local Authority Tax bill
- Mortgage Statement
- Tenancy Agreement or Rent Statement

Signature of Parent / Guardian:

..... Date:

Membership No. of Parent / Guardian:

(if already a member of Solent Credit Union)

Please send Form and I.D. etc. to:

Solent Credit Union
First Floor, Dolphin House
134-135 High Street
Southampton SO14 2BR

Email: solentcreditunion@phonecoop.coop

Telephone: 02381 788375

FOR OFFICE USE ONLY: -

Membership No.:

Proof of Identity received?

Proof of Address received?

Entered on Computer by Date