



HC CREDIT UNION APPLICATION FORM

If you would like to become a member of the HC Credit Union, please complete this form in BLOCK CAPITALS and return to a credit union branch or member of staff, or post to:
*HART CULTURE Credit Union c/o HC International,
660 Avenue West, Skyline 120, Braintree, Essex,
CM77 7AA*

Contact details

Surname: Mr/Mrs/Ms/Miss/Dr/Other:

Forename:

Home address:

Postcode:

Home telephone:

Date of birth:

Mobile: Email:

N.I. No:

CREDIT UNION ACCOUNT DETAILS

I would like to save £ per week/month

I would like to pay into my Credit Union Account by:

1.1 Cash over the counter Monthly direct debit (please complete)

1.2. direct debit mandate. We will send this to your bank)

1.3 . Payroll deduction (if you are employed by a participating employer, please complete payroll mandate. We will send this to your employer)

I would like to enter the HC Credit Union Members' Private Lottery.

A ticket would cost £1 per week/month from my savings (maximum £10 per month).

Please deduct £ per week/month from my savings until further notice.

I apply for membership of HC Credit Union and agree to abide by its' rules.

I declare that the information given by me is correct.

I understand that a non-refundable fee of £2 will be deducted from my first payment into the HC Credit Union and that I will not be a full member until this has been paid.

I agree to keep a minimum of £20.00 in my savings account to maintain my membership



Your signature:

Date:

Data Protection Statement: In accordance with the principles of the Data Protection Act 1998, we will use your personal details for the purposes of managing your accounts with the Credit Union.

Your personal details will be treated confidentially and will only be shared with other agencies for the purposes of credit referencing and debt recovery, for which purpose we hold a Category F Consumer Credit Licence.

By submitting this application form, you will be indicating your consent to receiving product and service information by letter, phone or e-mail from us and our partners unless you have indicated an objection to receiving such information by ticking the box.

OFFICE USE ONLY

Code:

Membership Number:

Approved: