



# APPLICATION FOR MEMBERSHIP

Please complete in BLOCK CAPITALS  
Please supply one proof of ID and one proof of address with this application.  
For a full list of suitable ID see page two.  
A minimum of £4.00 (to include £3.00 membership fee) is required to open the account.

Member No: \_\_\_\_\_ Mothers maiden name or other security password: \_\_\_\_\_

Mr  Mrs  Miss  Ms  Other \_\_\_\_\_ Surname: \_\_\_\_\_

First Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post code: \_\_\_\_\_

How long have you lived at your current address? \_\_\_\_\_ years \_\_\_\_\_ months

If less than three years please give previous address: \_\_\_\_\_

\_\_\_\_\_ Post code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Place of Birth \_\_\_\_\_ NI N<sup>o</sup>: \_\_\_\_\_ Nationality: \_\_\_\_\_

Employers name and address: \_\_\_\_\_

\_\_\_\_\_

## FORM OF NOMINATION

I \_\_\_\_\_ a prospective member of Dragonsavers Credit Union Ltd hereby nominate

\_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Relationship \_\_\_\_\_

as the person whom there shall be transferred at my decease such property in the Credit Union as may be mine at the time of my decease, whether shares or otherwise, should my application be successful.

**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 Dragonsavers 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.

How did you first hear about Dragonsavers Credit Union Ltd?

Word of mouth  Leaflet  News/magazine  Web  Other \_\_\_\_\_

**I hereby apply for membership of and agree to abide by the rules of Dragonsavers Credit Union Ltd. I declare that the information given by me on this form is true & correct to the best of my knowledge and belief.**

Signed: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## 1. Proof of Membership of the Common Bond

All Applicants are required to produce evidence that they live or work within the area covered by Rhondda Cynon Taff County Borough Council

RESIDENTS - a document showing name and address, eg Council Tax, Utility bill etc.

WORKING - pay slip or other document showing applicants name and name and address of employer.

STUDENT - evidence that the applicant is studying at an educational establishment within the Borough.

VOLUNTEER - a letter or other document stating that the applicant does voluntary work within the Borough

## 2. Money Laundering Regulations—proof of Identity and Address

Identity should be verified by the production of at least two of the following documents;

Full Driving Licence

Passport

Original Benefits Agency letter

Student / Staff ID Card

Notice of Tax Coding (current year)

Recent Utility Bill

Bank / Credit Card Statement

Council Tax Demand

Rent Book

Medical card

**Any bills/statements must be originals and no more than three months old. If you cannot produce any of the aforementioned forms of ID we will accept confirmation of identity from a person in authority. (ie, Doctor, Social Worker, Minister of Religion, Probation Worker etc)**

**PLEASE NOTE: We do not accept the following;**

Birth Certificate

TV Licence

Bank/Cheque guarantee cards

Mobile phone bill

Business Cards

FOR OFFICE USE ONLY			
<b>Full Driving licence</b>	<b>Ref No:</b> .....		
<b>Passport</b>	<b>Ref No:</b> .....	<b>Issue office:</b> .....	
<b>Building society pass-book</b>	<b>Name of BS:</b> .....	<b>Account no:</b> .....	
<b>Utility Bill</b>	<b>Name of supplier:</b> .....	<b>Account No:</b> .....	
<b>Council Tax</b>	<b>Account No:</b> .....		
<b>Rent Book</b>	<b>Landlord:</b> .....	<b>ref No:</b> .....	
<b>Bank/Credit Card statement</b>	<b>Company:</b> .....	<b>Acc No:</b> .....	
<b>Other</b>	.....		
<b>Proof of common bond</b>	YES/NO	<b>proof of ID</b>	YES/NO
<b>Membership fee paid</b>	YES/NO	<b>Initial share deposit paid</b>	YES/NO
<b>Signature of CU rep</b>	..... <b>Date:</b> .....		
<b>Entered onto computer</b>	(Date) .....		