

## smartsash engage

	177	14.2 4.19	7 7 7		<u> </u>	19	<u> </u>	<b>₩</b>	V. V	1. this	· • ·	100			•
Junior credit union member details					Authorised parent/ guardian details										
Title						Title									
First name					:	First name									
Last name		Last name													
Date of birth	,					Date of birth									
	D D	MM	YY	.Y	Y		D	D	M	М		Υ	Υ	Υ	Υ
Child signature						Parent/ guardia signature	an								
Date						Date									
	D D	M M	YY	Υ	Υ		D	D	M	M		Υ	Υ	Υ	Υ
Address				Instructions for Applicants											
									lete th	e shac	ded k	oxe	s in B	LOCK	
Postcode								CAPIT							
Time at address	Months			Before receiving your card, the credit union will supply you with terms and conditions. Please ensure you take											
								time	to rea	id an	d uı	nder	stanc	d the	•
Parent/guardian email address									and c e card.		ions	beto	ore re	eceiv-	
Phone number															

## FOR COMPLETION BY CREDIT UNION AUTHORISED SIGNATORY

Credit Union									
Child's member number									
Date of parent KYC									
	D	D	•	M	М	Υ	Υ	Υ	Υ

Instructions for credit unions

Please retain this application form for office use.

## Don't forget to download the FREE mobile app. Available from:











