

Advance Credit Union Ltd Payroll Deduction Form

Please complete in black ink

To the Payroll Manager:

Instructions 'Please commence deductions of the sum of £ _____

Amount in words: _____

each month from my wage/salary in favour of Advance Credit Union Limited
Deductions are to commence from the first available pay date and shall remain
in effect until such time as I give notice to the Credit Union, in writing, of any
changes'

Name:

Address:

Department:

Payroll No:

Please quote my membership number* _____ on all payments

* TO BE COMPLETED BY CREDIT UNION

Signature: Date:

Please complete and return to the Credit Union as the address below

FOR OFFICE USE ONLY

New Member: YES | NO

Special Instructions Noted: YES | NO

Checked at C.U. by:

Date:

Advance Credit Union Ltd

200 Sutton New Road, Erdington, Birmingham B23 6QU

t: 0121 350 8883 e: info@advancecu.org.uk

www.advancecu.org.uk



Advance Credit Union Ltd Application Form

Please complete all sections of this form

Title:

Surname:

First Name/s:

Date of Birth:

| |

N.I. Number:

Home Tel:

Mobile No:

Work Tel:

Email:

Current Address:

Post Code:

How long have you lived at this address?

Previous address if you have lived at the above address for less than 3 years:

Employer's Name and Address:

Is this position temporary/permanent?

BENEFICIARY FOR INSURANCE (or Next or Kin if preferred)

In most cases, the Credit Union provides Life insurance cover on both savings and loans at no direct cost to the you (terms and conditions do apply). For this reason we need you to complete the following declaration:

Nominate (name of beneficiary or next of kin):

Of (full address):

who is my (relationship):

as the person who should receive any monies in Advance Credit Union, whether in shares or otherwise, as may be mine at the time of my death.

Have you ever been a member of a credit union? Yes | No

How did you find out about this credit union?

Data Protection: If you do not wish to receive marketing material please tick box

"I hereby apply for a membership of Advance Credit Union and agree to abide by their rules. I declare that to the best of my knowledge the information given by me on this form is correct. I understand the initial annual membership fee of £2.00 will be deducted from my first payment.

Signature: Date:

Witnessed By:

Signature:

(Please note the witness cannot be named as a beneficiary)

FOR OFFICE USE ONLY
Proof of identity and residence

New Membership Number

Payroll Number:

Address:

Checked by (name):

Membership accepted by the Board of Directors on:

Accepted by: (BLOCK CAPITALS)

Signature:



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Payroll Membership Application Form

Thank you for your interest in becoming a member of Advance Credit Union. Inside this leaflet is the application form to join and a form to send payments to the credit union direct from your salary.

Please complete all sections of the form applicable and send to the credit union with your payroll number and proof of your address. The credit union will allocate you a membership number which will be sent to you by email, and will send your payroll declaration request to your employer's payroll department.

Your membership fee (at present £2.00 per annum) will be taken from your first payment.

Additional Information

Please visit our website: **www.advancecu.org.uk** for further information on:

- › The area we cover
- › Acceptable forms of ID
- › Organisations that offer payroll deduction
- › Other ways of paying into your credit union account
- › Other services we provide

On becoming a member don't forget to register to manage your account online.

