

Authorised and Regulated by  
The Financial Services Authority



**Red Kite Credit Union**

Undeb Credyd y Barcud Coch Cyf.

**Membership application**

Title \_\_\_\_\_ Membership number

Name \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ Postcode \_\_\_\_\_

email \_\_\_\_\_

'phone(s) \_\_\_\_\_

National insurance No.  Date of birth  /  /

I apply to become a member of Undeb Credyd y Barcud Coch Cyf. I understand that if my application is approved by the Directors my membership will have to conform with the Rules and policies of the Credit Union. I am aware that the Credit Union will keep information about me in accordance with the Data Protection Act. I declare that the information I have provided is true and correct.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

(For official use)

Proof of Identity  
Proof of address

(For official use)

Entrance fee £1 paid  [ tick and initial ]

Savings deposit £  [ enter amount and initial ]

Standing order form completed  [ tick and initial ]

Entrance fee to be deducted  [ tick and initial ]

Key-ring registration. (This slip will be destroyed after entry to secure database)

Ring Number..... assigned to [name] ..... Phone .....  
 of [address] .....

*Red Kite Credit Union* To be completed by CU, detached and given to member

Receipt for membership application form from [name] .....  
 of [address] .....

Entrance fee £1 paid  [ tick and initial ]

Savings deposit £ .....  [ enter amount and initial ]

Standing order form completed  [ tick and initial ]

Entrance fee to be deducted  [ tick and initial ]

Credit Union official/volunteer [print name] .....  
 [sign] ..... date .....

Documents received  
(and to be returned)

*Red Kite Credit Union* Membership number

Next of Kin and / or Beneficiary

This form offers you the chance to say who you want to receive your Credit Union assets if you die. You don't have to do this but we do need to know your Next of Kin

Member's name

Next of Kin (no witness required)  
 Name .....  
 Address .....

**Beneficiary**

I [print name] ..... hereby instruct Red Kite Credit Union to pay to [name(s)] .....

.....  
 of [address(es)] .....

.....  
 all shares and any other property belonging to me that the Credit Union holds at the time of my death

Member's signature ..... Date .....

Witnessed by [print name] .....

of [witness address] .....

.....  
 [witness signature] .....

Your beneficiary cannot be the witness

Guidance on use of on-line application form.  
Please print this page and then enter your title, full name, address and other details in the top left part of the form. We also ask you to supply a Next of Kin in the top right part of the form. You can also, if you wish, nominate a Beneficiary (or more than one) but this is optional. Your membership number will be assigned when the application is processed. We need to have your original usual signature.

You can post the completed form to us\* or can bring it in person to a service point. In either case the Financial Services Authority's regulations require us to see a Proof of Identity and a Proof of Address before we can enrol you as a member of the credit union. A separate down-loadable document on the web site gives lists of the forms of document acceptable to FSA for this purpose. In case of difficulty please contact the credit union.

You can also send or bring a completed Standing Order Mandate form if you wish to pay in this way and the £1 entrance fee can be deducted from the first payment. This form can be downloaded from the web site. Otherwise payment of the £1 entrance fee and a minimum initial shares/savings deposit of £1 are required before you become a full member. Any cheque should be made payable to 'Red Kite Credit Union' and be crossed.

\* Red Kite Credit Union, 20 Market Street, Builth Wells, Powys LD2 3EA