



BDS CREDIT UNION LTD
8 Main Street, Saintfield, BT24 7AA
Tel: 028 97511 295

APPLICATION TO OPEN AN ACCOUNT FOR A PERSON TOO YOUNG TO BE A MEMBER

MINOR APPLICATION INFORMATION			
NAME			
DATE OF BIRTH		PHONE LANDLINE	PHONE MOBILE
ADDRESS			

PARENT / GUARDIAN INFORMATION			
NAME			
CURRENT ADDRESS		RELATIONSHIP	
		DATE OF BIRTH	
		RELATIONSHIP	

For and on behalf of the first named _____ the parent / guardian of the said _____ hereby apply to open an account in the name of the said _____ and I agree to abide by the rules of this Credit Union regarding such account and declare that the information given by me on this form is true and correct to the best of my knowledge and belief.

Signature of applicant:

Date:

It is important that you read and understand the section entitled Your Information with this application form.

I _____ age _____ hereby confirm the above application and I wish to open an account in this credit union.

I authorise you:

- to open the account in my name; and
- to process the information I have provided with you for the purposes of maintaining my account.

Signature of applicant:

Date:

Tax Residency for the purposes of the Common Reporting Standard

- If you are tax resident in another country, please provide your Tax Identification Number ("TIN") and Country of Tax Residence:

1. TIN*																							
Country of Tax Residence*																							
2. TIN*																							
Country of Tax Residence*																							

I confirm that the information provided is true and correct to the best of my knowledge, and that if my circumstances change, I will notify the credit union:

Applicant Signature..... Date:

- If you are not tax resident in another country, please sign the following:

I wish to declare that I am not resident for tax purposes in any other country, and that if my circumstances change, I will notify the credit union:

Applicant Signature..... Date:

***Mandatory Field**

****This information is being sought for the purposes of reporting obligations under the Common Reporting Standard (CRS), as provided for by the International Tax Compliance Regulations 2015. The information required to be reported under the CRS, including name, address, TIN, account number, account balance and payments on the account will be provided to the HMRC and may be exchanged securely with another Competent Tax Authority in your jurisdiction of tax residence, but such information will at all times be treated with the strictest confidentiality as required by data protection legislation. Only data that is legally required to be reported will be provided to the HMRC.**

For more information on this, please speak to your credit union or see

<http://www.oecd.org/tax/transparency/automaticexchangeofinformation.htm>

N.B. - Rule 18 of Standard Rules for Credit Unions (Northern Ireland) reads:

18. Two months before a minor depositor attains the age of 16 the credit union shall serve upon him and his signing parent or guardian a notice requiring the minor on attaining that age either to withdraw the balance of the account or to join the credit union so that the balance can be transferred to shareholding in his name in the credit union; if the minor depositor takes no action he shall be deemed to have applied for membership of the credit union and after deduction of the normal fee on joining, the balance shall be transferred to shareholding in his name. The transferring minor will not be permitted to transact as a member until he has complied in full with Rule 6 (3) and Rule 7.

Financial Services Compensation Scheme Information Sheet and Exclusions List Declaration

Please tick the box below to confirm the following:

I acknowledge receipt of the Information Sheet and Exclusion List

Accounting Opening Privacy Notice

Please take time to read the account opening privacy notice of the credit union which outlines how and why we process your personal data. A copy is available for you to take away. Please ask a member of staff for further information.

Receipt of obligatory notices by email



There are certain notices that credit unions are obliged to provide from time to time. Please provide your email address if you would like to receive these obligatory, **non-marketing** communications by email (for example notice of the Annual General Meeting). This will assist the Credit Union in reducing its carbon foot print and will also reduce costs.

Email address:	
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Please note that we maintain the right to contact members by such means as best available to us in relation to a non-performing loan or outstanding debt to the credit union, including by text or email.

Your Marketing Preferences



As part of improving our service to you, from time to time, we would like to inform you of goods, services, competitions and/or promotional offers available from us. We may wish to use different means when sending such marketing communications. Please now indicate by which methods, **if any**, you consent to being contacted by ticking **Yes** to each method of communication below-

	Yes
Post	<input type="checkbox"/>
Email	<input type="checkbox"/>
Text	<input type="checkbox"/>
Landline call	<input type="checkbox"/>
Mobile call	<input type="checkbox"/>

Signature of applicant

Date:

You have a right to notify us free of charge at any time of your right to refuse such marketing by writing to us or by using the "opt-out" options in any marketing message we send you.

Please contact us directly should you wish to change or withdraw your consent.

THIS SECTION TO BE COMPLETED BY THE CREDIT UNION

Evidence of Identification (copies must be attached) (Complete at least one of the following)	Evidence of Address Verification (copies must be attached) (Complete at least one of the following)
Current Valid Passport <input type="checkbox"/>	Current Utility Bill (e.g. Gas/Electricity Bill) <input type="checkbox"/>
Current Valid Driving Licence <input type="checkbox"/>	Official document from a Government Body <input type="checkbox"/>
National Identity Card <input type="checkbox"/>	Original Bank/Building Society Statement <input type="checkbox"/>
Birth Certificate <input type="checkbox"/>	Council Document <input type="checkbox"/>
(for a minor/or evidence of name change only)	Current Insurance Document
Other* <input type="checkbox"/>	(e.g. House / Motor Insurance)
Please specify	Other <input type="checkbox"/>
	*Please specify
	(in genuine cases where the above cannot be presented)

For Credit Union Office Use Only

Application approved and details verified in accordance with the Standard Rules for Northern Ireland

Approved by	
Signature	
Position	(Membership Committee)
Date:	
Book Number:	