



Application for Membership

Please complete boxes on-screen. Print, sign, date & return.
If you make a mistake - click the reset button and start again.

Mr/Mrs/Miss/Ms/(Other)	<input type="text"/>	Surname	<input type="text"/>
First name	<input type="text"/>	Middle name(s)	<input type="text"/>
Date of birth	<input type="text"/>	National Insurance No	<input type="text"/>
Home address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Tel No (day)	<input type="text"/>	Mobile	<input type="text"/>
Tel No (eve)	<input type="text"/>	Email	<input type="text"/>

Form of Nomination : In the event of my death I nominate the following person(s) to whom there shall be transferred such property in the Credit Union as may be mine at the time of my death - whether in shares or otherwise. (If you wish to nominate more than one person please attach their details on a separate sheet indicating how you would like the amount to be divided). I understand that the maximum amount provided for under nomination is £5,000 and any residual balance in my account shall be paid to my legal Personal Representative(s).

Name	<input type="text"/>	Relationship	<input type="text"/>
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		

Declaration : I wish to join FAIRshare Credit Union Ltd and agree to abide by its rules. I declare that I live or work in Telford & Wrekin, Broseley or Much Wenlock. If applicable I authorise my contribution from my pay/bank until further notice. I understand that a non-returnable membership fee of £5 will be deducted from my first payment to cover administration costs. I understand that all the information given by me will be retained securely in accordance with the Data Protection Act 1998. I declare that the details given on this form are true and correct.

Signature:	<input type="text"/>	Date:	<input type="text"/>
Witness' signature*:	<input type="text"/>	Date:	<input type="text"/>

* The person witnessing the applicant's signature must not be the beneficiary.

Simply complete the relevant sections of the application form and return it to: **FAIRshare Credit Union Ltd., FAIRshare House, Southwater Square, Telford Town Centre, Telford TF3 4HU.** You will need to provide two forms of identification to open your account - one from each category:

- 1. Proof of your Name (Identity)** E.g. Driving Licence OR Passport
- 2. Proof of your Address** E.g. A recent Utility Bill (no more than 3 months old)
OR Local Council Tax Bill OR Rates Book OR Bank Statement

If you have any questions call our friendly membership services team on 01952 28 25 28 who will be able to help you.

For office use only:	Membership No	<input type="text"/>
ID checked and copied	<input type="checkbox"/>	
Signature of CU officer: _____	Date: _____	



Payroll Deduction Order

Please complete boxes on-screen. Print, sign, date & return.
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To: Payroll Section

Please make the following deduction(s) from my weekly/monthly* pay in favour of FAIRshare Credit Union Ltd:

£ per week/month* from the first available pay date.

** Please delete as appropriate*

Name	<input type="text"/>		
Company	<input type="text"/>		
Department	<input type="text"/>	Section	<input type="text"/>
Payroll No	<input type="text"/>	Member No	<input type="text"/>

Signature(s): Date:

Please return this form to:

FAIRshare Credit Union Ltd., FAIRshare House, Southwater Square, Town Centre, Telford TF3 4HU.

Tel No : 01952 28 25 28

Email : info@fairshare.uk.com

For office use only: Actioned by: _____ Date: _____
