

**Hastings & Rother Credit Union Ltd**

49 Cambridge Gardens,  
Hastings TN34 1EN



Phone: 01424 202651

Email: info@hrcu.org.uk

www.hrcu.org.uk

Title..... Surname.....

Forenames .....

Address .....

.....

Date of birth ..... National Insurance No.....

Phone.....

E-mail .....

Housing Association (if applicable) .....

I have received a copy of the Financial Services Compensation Scheme information sheet.  
*[Please tick box to confirm]*

I hereby apply for membership of the above credit union and agree to abide by its rules.  
I declare that the information given by me on this form is true and correct to the best of my knowledge and belief.  
I understand that a non-returnable membership fee of £4 will be deducted from my first payment into the credit union to cover administration costs.

If you require an AllPay card to pay into your account (fee of £3.50 payable), please tick here

If you require an Engage Pre-Paid Debit Card, please tick here

Signed.....Date .....

For how the Credit Union will use your personal data and restrictions employed in that use, please refer to the document entitled "General Data Protection policy" available on our website ( insert web address) or in paper format upon request.

**Please turn over and complete details of Next of Kin**

Sept 2018

**Next of Kin Nomination**

I hereby nominate:

Name (of beneficiary): .....

Address: .....  
.....

as the person to whom there shall be transferred at my death such property of the credit union as may be mine at the time of my death, whether in shares or otherwise.

Signed (prospective member) .....

Signed (witness) .....

*The witness shall not be the beneficiary*

**For office use only:**

ID provided

1.....

2.....

3.....

Accepted/declined on .....

Membership number .....