nefirst CREDIT UNION

Membership application

Title: _____ Surname: _____ Forename(s): _____

Address: _____

Postcode: _____ Date of Birth: _____

Occupation: _____

Telephone Home: _____ Telephone Mobile: _____

E-mail: _____

Please give employer details if you work but don't live in County Durham, Northumberland or Tyne & Wear:

Name of Employer: _____ Tel No: _____

Address of Employer: _____

Bank Name: _____

Bank Address: _____

_____ Postcode: _____

Account Name: _____

Sort Code: _____ Account Number: _____

Nomination of Beneficiary:

In the event of my death I hereby nominate the person named below to receive any benefits arising from my NEFirst Credit Union accounts.
Note: Nominations will be considered on death of the member, but they are not legally binding

Beneficiary Name: _____

Beneficiary Address: _____

Beneficiary E-mail: _____

Relationship to you: _____

Your Signature: _____ Date: _____

Signature of Witness: _____ (must not be beneficiary named above)

Declaration and BACS Authority:

I hereby apply for membership of and agree to abide by the rules of NEFirst Credit Union Ltd. I declare that all the information given by me on this form is true to the best of my knowledge.

I authorise NEFirst Credit Union to make transfers to my above Bank Account in accordance with separate instructions forwarded to the Credit Union. I confirm that I will not hold NEFirst Credit Union liable for any consequential loss which may arise in delays in the transmission of funds to my bank account and will immediately advise the Credit Union of any changes to my bank account details. This authority shall continue until notice is given in writing to the Credit Union.

Signature: _____ Date: _____

GATESHEAD OFFICE
Unit 12, Jackson House,
Jackson Street, Gateshead
NE8 1ED

Over 95 Local Service Points

STANLEY OFFICE
25-33 Front Street, Stanley,
Co Durham DH9 0JE

Tel: 0330 055 3666

Web: www.nefirstcu.co.uk

Privacy Statement

NEFirst Credit Union is committed to protecting our members' privacy. In accordance with the General Data Protection Regulation (GDPR) requirements, we may process, store and share your personal data for reasons including setting up and managing your account(s) with us, and fulfilling our legal obligations.
Our Privacy Notice sets out the lawful basis and specified purpose on which any personal data we collect from you, or that you provide to us, will be processed by us. It also sets out your rights under GDPR.
If you would like to read the full details of how your personal data may be used, our Privacy Notice can be accessed via our website www.nefirstcu.co.uk or by calling us on 0330 0553666.

Marketing Preferences:

We'd love to send you our regular communications, including the latest news about the credit union and exclusive offers. You can choose to be contacted by email, post and text message below:

☐ Yes please – Email me the credit union communications and news
☐ Yes please – Send me the credit union communications and news in the post
☐ Yes please – Text me details of the credit union communications and news
☐ No thank you – I don't want to receive any credit union communications or news

You can trust us
Our credit union does not pass on our members' contact information without their permission. To read our full Privacy Notice, please visit our website www.nefirstcu.co.uk or call us on 0330 0553666.

If at any point you want to change or withdraw your communications preferences, please contact us on 0330 0553666 or info@nefirstcu.co.uk

Please return this form to any of our local service points or offices, or post to: NEFirst Credit Union, 25-33 Front Street, Stanley, DH9 0JE

For Office Use Only

Evidence of name:_____ Evidence of Address:_____ Evidence of D.O.B: _____

Evidence provided (please underline): Passport   Driver's License   Official letter on headed paper

Passport number:_____ Driver's license number:_____ Letter Origin:_____

Passport Expiry Date:_____ Driver's license date:_____ Letter dated:_____

ID&V Search requested? Y/N   Refer to MLRO: Y/N

Verified by: _____

Role and location of verifier: _____

Date verified: _____

MEMBERSHIP NO:_____

NEF/MA/V6-03-19