

DECLARATION – I the undersigned declare that I am not a member of another Credit Union in St. Lucia or that, if I am, I have declared this fact as above-stated and permission has been granted by that other Credit Union for me to become a member of this Credit Union and I know of no circumstances which would prevent me from becoming such a member. The facts herein stated are true to the best of my knowledge, information and belief. I hereby consent to the Credit Union verifying or disclosing this information or any other financial information to or obtaining further information from any other financial or other institution. I agree to conform to the Bye-Laws of this Credit Union.

SIGNATURE OF APPLICANT:

DATE: (dd/mm/yyyy).....

APPOINTMENT OF NOMINEE/BENEFICIARY

In accordance with section 17 of the Co-operative Societies Act Chapter 82 Rule 8 of the Co-operative Societies Rules, made thereunder, and the Bye-Laws of the abovenamed society, we hereby nominate the following person(s) to whom or to whose credit the share or interest of the value of such share or interest held by me in the said Society shall in the event of my death be paid or transferred (in the proportions respectively shown hereunder).

BENEFICIARY #1 NAME:

RELATION:

ADDRESS:

PERCENTAGE:

TELEPHONES (HOME):

(WORK) :

(CELL):

BENEFICIARY #2 NAME:

RELATION:

ADDRESS:

PERCENTAGE:

TELEPHONES (HOME):

(WORK) :

(CELL):

SIGNATURE OF APPLICANT:..... DATE: (dd/mm/yyyy)...../...../.....

OFFICIAL USE ONLY

NAME OF STAFF MEMBER OPENING ACCOUNT *(please print)*:

SIGNATURE OF STAFF MEMBER: DATE: (dd/mm/yyyy)...../...../.....

APPROVAL OF MEMBERSHIP

SECRETARY NAME: *(please print)*: DATE MEMBERSHIP APPROVED:

SECRETARY SIGNATURE: DATE: (dd/mm/yyyy)...../...../.....

SUPERVISORY COMMITTEE: DATE: (dd/mm/yyyy)...../...../.....

ENTRANCE FEE \$5.00

BYE-LAW \$5.00

PASS BOOK \$5.00