

Young Saver member application

Gateway Credit Union Ltd. • 21 Commercial Street • Pontypool • Torfaen • NP4 6JQ
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Young saver details

Title:	Forenames:	Surname:
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Address: _____

Postcode: _____

Email: _____ School _____

Tel: _____ Mobile: _____ Date of Birth: / /

Authorised adult details

Title: _____ Surname: _____ Forename: _____

Address: _____

Postcode: _____

Tel: _____ Mobile: _____ Date of Birth: / /

Email _____

Statement preference

(please circle one)

Young saver by post

Adult's address by post

Young saver by email

Adult by email

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

Young Saver Signature:	Date / /
Authorised adult Signature:	Date / /
Signature of CU rep:	Date: / /

We keep your information safe and handle it in accordance with our Privacy Policy., a copy of which is on our website www.gatewaycu.co.uk. We send out an annual statement of your account.

School ID verification: We can accept ID verification from schools without the need for the usual paper proofs. However, the school must confirm the identity of the child named by signing below.

School's authorised signature: _____ Date: / /

Name of signatory : _____ signing on behalf of:

Name of school : _____