

Classic Account Application Form



Please complete this form using clear block capitals using a ball point pen.
Fields marked with an * are mandatory.



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|---|
| Credit Union details |
| Notts and Lincs Credit Union 69 Maid Marian Way Nottingham NG1 6AJ 0115 8283121 |

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|--|--------------------------------|--------------------|--|----------------------|--------------|----------|--|
| Credit Union Member details | | | | Membership number: * | | | |
| Title: * | | Gender: | | Date of birth: * | (dd/mm/yyyy) | | |
| First name: * | | Initial(s): | | Last name: * | | | |
| Home phone: | | | | Mobile phone: * | | | |
| Address: * | | | | | | | |
| | | | | | | | |
| Postcode: * | | Time at address: * | | Years | | Months | |
| Email address: | (* required for online access) | | | | | | |
| Previous address (if less than 12 months): | | | | | | | |
| Address | | | | | | | |
| | | | | | | | |
| Postcode: | | Time at address: | | (Years) | | (Months) | |

Account Holders Agreement

| | | |
|---------------------------|--|---------|
| Please print your name: * | | |
| Your signature: * | | Date: * |

FOR COMPLETION BY CREDIT UNION AUTHORISED SIGNATORY

Remember to enter the Promotional Code on all card applications where applicable

Name of authorising signatory: Signature:

*Documents checked and verified by CU:

*These documents are available to Contis Group on request.