



BLANCHARDSTOWN & DISTRICT CREDIT UNION LIMITED

Membership Application

For credit union use only:

Account Number: _____

Personal Details:

First Name(s): _____

Surname: _____

Date of Birth: _____

Nationality: _____

Marital Status: _____

Address: _____

Length of time at present address: _____

Owner Private Tenant Mortgage
Living with Parent Local Authority Other

If living at this address less than 3 years, please state previous address:

Tel: Home: _____

Tel. Mobile: _____

PPSN Supplied: Yes No

Email address: _____

Are you in current employment? Yes No If you have answered yes please fill out the following:

Employment Details:

Work Address: _____

Length of time in current employment: _____

Occupation: _____

Main source of wealth/funds: Wages Welfare Other Details of other: _____



BLANCHARDSTOWN & DISTRICT CREDIT UNION LIMITED

Form of nomination

****A NOMINATION is a legally binding, written instruction** where the member specifies the person or persons that they wish their funds held in the *Credit Union* to be transferred to in the event of their death.

Member Number: _____

I, (PRINT NAME) _____

of (Print Address) _____

being a member of Blanchardstown & District Credit Union Limited, hereby nominate the

Signature of member: _____

Date: _____

Name:	Address:	Date of birth:	Contact number

For Office Use Only

Proof of Identity:	Valid Passport <input type="checkbox"/>	Driving Licence <input type="checkbox"/> Other <input type="checkbox"/> _____
Proof of address:	Utility Bill <input type="checkbox"/>	Bank statement <input type="checkbox"/> Other <input type="checkbox"/> _____
Proof of PPSN:	Requested: YES <input type="checkbox"/> NO <input type="checkbox"/>	Received: YES <input type="checkbox"/> NO <input type="checkbox"/>
AML Risk entered on system:	YES <input type="checkbox"/> NO <input type="checkbox"/>	PEP: YES <input type="checkbox"/> NO <input type="checkbox"/>

Opening Hours

Monday 9.30am - 5.00pm

Tuesday 9.30am - 5.00pm

Wednesday 10.30am* - 5.00pm

Thursday 9.30am - 5.00pm

Friday 9.30am - 5.00pm

Saturday 9.30am - 5.00pm

*To facilitate staff training the office will open at 10.30am on Wednesday.

Tel: 01 820 3495

Fax: 01 820 8836

Website: www.blanchardstowncu.ie

Email: info@blanchardstowncu.ie (general queries)

Email: loans@blanchardstowncu.ie (loans queries)