

GRAND BAY CO-OPERATIVE CREDIT UNION

KIDDIES CLUB APPLICATION FORM

Account Number: _____

STAFF ID _____

MINOR'S PERSONAL DETAILS

Surname Name: _____

First Name: _____

Middle Name: _____

Date of Birth: _____

Male: _____ Female: _____

Nationality: _____

Identification Number (Passport) _____

Birth Certificate # _____

Address: _____

Mother's Name _____

Father's Name _____

PARENT/ LEGAL GUARDIAN/ BENEFICIARY DETAILS

Account Number _____

Title _____

Surname: _____

First Name _____

Date of Birth: _____

Nationality: _____

IDENTIFICATION TYPE

Passport Number _____ Country _____

Social Security Number _____ Country _____

Driver's License Number _____ Country _____

National ID card Number _____ Country _____

Relationship to minor: _____

Telephone no. _____

Address: _____

Email: _____

Date: _____

I hereby apply for membership for the above-mentioned child and I agree to serve as trustee for his/her account until he/she reaches the age of eighteen. On attaining the age of 18 the account becomes a normal membership account.

Signature of Parent/Legal Guardian/Beneficiary

FOR OFFICIAL USE ONLY

Account # _____

Date opened _____

Risk: High

Medium:

Low:

PEP

Approved by: _____

Date: _____