

For Office use only  
Membership Number:

## APPLICATION FOR MEMBERSHIP

Please complete clearly in **BLOCK CAPITALS**

I am applying for membership because I:

Live in Hackney  Work in Hackney  Study in Hackney

### PERSONAL DETAILS

Title:  Surname:

First name:

Middle name(s):

Home address:

Post code:

Home telephone:

Mobile:

E-mail:

Date of birth:   /   /

National Insurance No:

Nationality:

# WORK DETAILS

If you are in employment (paid or unpaid) please fill in the details below:

Employer:

Employer's address:

Post code:

Work telephone:

How did you hear about Hackney Credit Union?

**I hereby apply for membership and agree to abide by the rules of Hackney Credit Union Ltd.**

**I agree that Hackney Credit Union may use my information for the purposes outlined below. I agree that as a member of Hackney Credit Union they can use this information to contact me in the future with further information about the credit union.**

**I declare that the information given by me on this form is true and correct to the best of my knowledge and belief.**

**Signature:**

**Date:**

Hackney Credit Union is registered under the Data Protection Act 1998. The information you provide will be used by Hackney Credit Union to administer your membership account(s) and to ensure our marketing is reaching our target groups. The information may be shared with other public or voluntary organisations that are funding Hackney Credit Union only as part of their monitoring requirements. At no time will your personal information be passed to organisations for marketing or sales purposes.

*For Office Use Only* Three items of evidence:

1

2

3

## NOMINATION OF BENEFICIARY

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In the event of my death, I \_\_\_\_\_  
nominate the person(s) below to receive any monies due from the  
Credit Union whether in shares or otherwise.

Full name:

Address:

Post code:

Home telephone:

Mobile:

Relationship to you:

**Your signature:**

**Date:**

Witness name:

**Witness signature:**

**Date:**

*(The Witness must not be the beneficiary)*

If you would like to nominate more than one beneficiary, please tick the box  
and complete an additional beneficiary form (available on request).

## MEMBER PROFILE

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This information will be treated with confidence and will only be used to help Hackney Credit Union reach all sections of the community.

**Gender:**  Female  Male

**Are you disabled?**  Yes  No

### Ethnic Origin:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> White-British                   | <input type="checkbox"/> White-Irish                   | <input type="checkbox"/> White-Other       |
| <input type="checkbox"/> Asian/Asian British-Indian      | <input type="checkbox"/> Asian/Asian British-Pakistani |  |
| <input type="checkbox"/> Asian/Asian British-Bangladeshi | <input type="checkbox"/> Asian/Asian British-Other     |  |
| <input type="checkbox"/> Chinese                         | <input type="checkbox"/> Vietnamese                    |  |
| <input type="checkbox"/> Mixed-(White & Black Caribbean) | <input type="checkbox"/> Mixed(White & Black African)  |  |
| <input type="checkbox"/> Mixed-(White & Asian)           | <input type="checkbox"/> Mixed-Other                   |  |
| <input type="checkbox"/> Black/Black British-Caribbean   | <input type="checkbox"/> Black/Black British-African   |  |
| <input type="checkbox"/> Black/Black British-Other       |  |  |
| <input type="checkbox"/> Other                           | <input type="checkbox"/> Not known                     | <input type="checkbox"/> Prefer not to say |

### What is your approximate annual household income?

- |  |  |
|--|--|
| <input type="checkbox"/> less than £15,000           | <input type="checkbox"/> between £15,000 and £35,000 |
| <input type="checkbox"/> between £35,000 and £55,000 | <input type="checkbox"/> more than £55,000           |
| <input type="checkbox"/> Prefer not to say           |  |

**Do you receive state benefits?**  Yes  No

Please list

### Are you a

- |  |                      |
|--|----------------------|
| <input type="checkbox"/> Tenant of a Housing Association? - please state | <input type="text"/> |
| <input type="checkbox"/> Tenant of Hackney Council?                      |                      |
| <input type="checkbox"/> Tenant of a private landlord?                   |                      |
| <input type="checkbox"/> Home owner?                                     |                      |
| <input type="checkbox"/> Other?  |                      |

### How would you prefer to make payments?

- |   |   |                                   |
|---|---|-----------------------------------|
| <input type="checkbox"/> Cash   | <input type="checkbox"/> Cheque by post | <input type="checkbox"/> PayPoint |
| <input type="checkbox"/> Payroll deduction (with participating employers) |   |                                   |
| <input type="checkbox"/> Standing Order                                   | <input type="checkbox"/> Direct Debit   |                                   |