

# YourB Credit Union Membership Application

Please ensure that first applicant or the guardian signs this application. Please use black ink and BLOCK CAPITALS, and clearly tick the appropriate boxes. A maximum of 2 applicants can apply for a membership and must be the second applicant under aged of 16. First applicant must be aged 16 or over. First applicant's details to be completed in all cases. To help us process your application as quickly as possible, please ensure that you complete all mandatory fields marked with a \*.

## Section 1

Personal details	First Applicant/Guardian	Second Applicant (Child under 16)
Title*		
First name*		
Middle name*		
Surname*		
If you have ever been known by a different name		
Nationality*		
Date of birth*		
Gender*		
Relationship to first applicant*		
Marital status*		
Number of dependents*		
Passport Number		
NI Number		
YourB membership number if already a member		

## Security Details

Please complete the following question to allow us to establish your security details. First applicant only.

Mother's Maiden Name*	
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If contacting us by phone or other means, we may ask you for an access password.

Please choose the password that you will use: \_\_\_\_\_

What hint should we give you for your password: \_\_\_\_\_

Contact details	
Address Line 1*	
Town*	
Postcode*	
Date moved to address*	
Home telephone number*	
Mobile telephone number*	
Email address*	

Please provide details of your previous address(es), if you have been at your current address for **less than 3 years**.

Address Line 1*	
Town*	
Postcode*	
Date moved to address*	

**Second previous address**

Address Line 1*	
Town*	
Postcode*	
Date moved to address*	

## Section 2

**YourB Account statement preference**

We will send your account statements to you through our secure Email facility. You can, however, choose to receive hard copies of your account statements	<input type="checkbox"/> I/we wish to receive hard copies of statements for my/our account
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**Your Bank Details**

Bank Name		
Account Number		
Sort Code		

## Section 3

**Data protection and marketing consent**

Any information which you provide to us will be added to our database and used to administer your account, for statistical analysis, for debt collection and fraud prevention.

We may provide your data to third parties who are involved in the delivery of our products and services, however, we will not provide your information to third parties for marketing purposes.

You may request in writing, upon payment of a fee, a copy of the details held about you by YourB Credit Union Ltd.

**Keeping you informed**

From time to time we'd also love to tell you about our Islamic financial services, products and any new offers that we think you'd be interested in based on the information we hold about you. If you would like to hear from us about these please tick the appropriate box(es) below so we know how you would prefer us to contact you.

E-Newsletter	Email	Post	Phone	SMS
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If you would prefer not to hear from us with YourB marketing information and offers, please tick here:

You can change your preferences at any time.

## Section 4

### Equal opportunities monitoring

We are committed to equal opportunities. This monitoring form is voluntary but the information we collect here is very useful to us as it helps us to make sure that we are considering the diverse needs of our members. The information you supply on this form will be kept confidentially.

#### Your ethnic origin

##### Asian or Asian British

- Bangladeshi
- Indian
- Pakistani
- Other Asian background (specify if you wish):

##### White

- British
- Irish
- Other White background (specify if you wish):

##### Black or Black British

- African
- Caribbean
- Other Black background (specify if you wish):

##### Mixed

- White and Asian
- White and Black African/Caribbean
- Other mixed background (specify if you wish):

##### Other ethnic group

- Arab
- Prefer not to say
- Chinese
- Other ethnic group (specify if you wish):

#### Your religion or belief

- Muslim
- Jewish
- Hindu
- None
- Christian
- Buddhist
- Sikh
- Prefer not to say

#### Disability

The Equality Act 2010 defines a disabled person as someone who has a physical or mental impairment which has a substantial and long-term adverse affect on their ability to carry out normal day-to-day activities. Do you consider yourself to be disabled?

- Yes - Please specify:
- No
- Prefer not to say

## Section 5

### Important - your personal information

We may use fraud prevention agencies to help us make decisions. By confirming your agreement to proceed you are accepting that we may use your information in this way.

- 1) When you apply to us to open an account, we will check the following records about you and others:
  - a) Our own.
  - b) Records at CRAs. When CRAs receive a search from us they will place a search footprint on your credit file that may be seen by other lenders. They supply to us both public (including the electoral register) and shared credit and fraud prevention information.
  - c) Records at FPAs. We will make checks such as assessing this application for credit, and verifying identities to prevent and detect crime and money laundering. We may also make periodic searches at CRAs and FPAs so as to manage your account with us.
- 2) We will carry out checks such as verifying identities to prevent and detect crime and money laundering. We may also make periodic searches at FPAs so as to manage your account with us.
- 3) If you give us false or inaccurate information and/or we suspect identify fraud, we will record this and may also pass this information to FPAs and other organisations to prevent fraud and money laundering. Law enforcement agencies may access and use this information.
- 4) Your data may also be used for other purposes for which you give your specific permission or, in very limited circumstances, when required by law or where permitted under the terms of the General Data Protection Regulation (EU) 2016/679 and the Data Protection Act 2018.
- 5) Your information may be held and processed outside of the European Union and you give us explicit permission to do so.

## Section 6

### Basic information about the protection of your eligible deposits

YourB Credit Union Ltd is covered by the Financial Services Compensation Scheme (FSCS). The FSCS can pay compensation to depositors if a bank or credit union is unable to meet its financial obligations. Most depositors including most individuals and businesses are covered by the scheme.

Eligible deposits in YourB Credit Union are protected by	the Financial Services Compensation Scheme (FSCS)
Limit of protection	£85,000 per depositor per institution
If you have more eligible deposits at the same bank, building society or credit union	All your eligible deposits at the same bank, building society or credit union are "aggregated" and the total is subject to the limit of £85,000
If you have a joint account	The limit of £85,000 applies to each depositor separately
Reimbursement period in the event of the failure of your bank, building society or credit union	20 working days
Currency of reimbursement	Pound sterling (GBP, £) or for branches of UK banks operating in other EEA Member States, the currency of that State
To contact the FSCS for further information on compensation	Call: 0800 678 1100 Visit: <a href="http://fscs.org.uk">fscs.org.uk</a> Email: <a href="mailto:ict@fscs.org.uk">ict@fscs.org.uk</a> Write to: FSCS, 10th Floor Beaufort House, 15 St Botolph Street, London, EC3A 7QU

# Section 7

## Declaration and signature

1. By signing below you are applying to YourB Credit Union Limited.
2. We may ask you to provide original documents of identity when you open your account, and/or, we may search credit reference/fraud prevention agencies files in assessing your application. The agencies also give us other details and information from the Electoral Register to verify your identity. The agencies keep a record of our search, whether or not your application proceeds. We may use the scoring methods to assess your application and verify your identity.
3. By applying in more than one signatory's names you will create a financial association with that person. You declare that you are entitled to provide information about the additional signatory.
4. Information held about you by the credit reference agencies and fraud prevention agencies may already be linked to records relating to one or more of your partners. During this application you may be treated as financially linked and your application will be assessed with reference to any "associated" records.
5. I/we have read the section entitled 'Basic information about the protection of your eligible deposits'. By signing this form I/we acknowledge that I/we have been provided with the basic information relating to the protection of my/our eligible deposits under the appropriate deposit guarantee scheme.
6. Declaration:
  - I/we have read the section entitled Data Protection Statement and Marketing Consent and I/we consent to the use of our data being added to YourB database, and that we have given our preference for marketing purposes.
  - I/we request you to open a YourB Credit Union account in the name of the child (where applicable).
  - I/we hereby apply for membership of YourB Credit Union Ltd. and agree to abide by its rules and declare that the information given by us on this form is true and correct to the best of our knowledge.
  - I/we declare that if my/our application is accepted:
    - I/we will only use my/our YourB Credit Union account for personal use and in the interest of the young person.
    - I/we will not use it as a club, charity, trust, sole trader, company, partnership or other kind of business account.
    - I/we confirm that I am/we are opening this account, and investing this sum of money on behalf of the young person, in my/our capacity as Trustee(s).
    - I am/we are aware of the identity of the beneficiary, and the source of funds to be invested in this account.

<b>First applicant's signature</b> Your signature must not go outside the box		Date
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Name of the Common bond organisation to which you belong:

\_\_\_\_\_  
**Supporting statement or signature:** Please bring statement from common bond organisation or from a current YourB member to verify that you meet the common bond.

Name of verifier (and YourB membership number if applicable):

\_\_\_\_\_  
Verifier's Signature:

\_\_\_\_\_  
Date:

## Notes for Supporting Documents:

### Proof of ID – Adult 16 years and above:

Current Passport or Photocard Driving Licence should be obtained in most cases.

If unable to do so, then YourB will consider the following:

- Letter from School, College or Care Institution
- Letter from DWP regarding pension or benefits
- Residency card, ID card or refugee leave to remain card
- Document issued by Public Sector bodies or local authorities

### Proof of Address for adult member:

A further document is required for Proof of address. Examples include:

- Benefit Book, Pension Book, or Letter from DWP
- Council Tax Bill
- Utility Bills
- Bank Statement
- Credit Card Bill
- Rent statement or Tenancy agreement

It may be that you are unable to provide standard evidence, for example some of YourB members may be: Individuals dependant on the care of others, dependant spouses, or students. Under these circumstances, supporting statement from common bond organisation can be considered for proof of address. This must specifically confirm the address of the applicant.

### Proof of ID for a Junior Saver:

All Child Accounts need ID PLUS ID for adult (if YourB do not already have this)

- Birth Certificate
- Passport
- NHS Medical Card
- Child Benefit Documentation
- Child Tax Credit Documentation
- Child Trust Fund Letter

### Proof of Address for a Junior Saver:

A further document is required for Proof of address. Examples include:

- Letter from School, College or Care Institution on headed paper from the school stating; the name of the child and their residential address.
- Supporting statement from common bond organisation can be considered for proof of address. This must specifically confirm the address of the applicant.

### Supporting Statement or signature from common bond organisation or current YourB member

(Any one of the below is deemed sufficient proof of eligibility to join YourB):

- Letter from common bond organisation stating the name of the individual, their residential address and confirming that they are a member/employee or otherwise associated;
- A representative of the common bond organisation to sign and stamp the application form
- Alternatively, a current YourB member to verify that the potential member does meet the common bond and to sign the application form.

### Family membership

For Family members, proof of ID and address are sufficient. Supporting statement from common bond organisation is not required.