



Friendly and Affordable Financial Services

**Application for Junior Account**

Approval Code:
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**Trustee Information**

Relationship to child:	Title: Mr/Mrs/Ms/Miss
First Name:	Family Name:
Address:	
Email:	
Post Code:	Date of Birth:
Tel. Number:	Mobile Number:

**Junior Account Information**

First Name:	Family Name:
Address:	
Post Code:	Date of Birth:

**Nomination**

In the event of the death of the trustee before the account holder reaches 16 years old, the following person is nominated for responsibility of the account on the Junior members behalf.

Nominee First Name:	Family Name:
Address:	
Tel No.	Mobile No.
Witnessed by (print):	
Witness Signature:	

**Trustee Declaration:** *I declare that the above information is accurate and true to the best of my knowledge and belief.*

<b>Signature of Trustee:</b>	<b>Date:</b>
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**Data Protection Statement**

In accordance with the principles of the Data Protection Act 1998, we will use your personal details for the purposes of managing your accounts with the Credit Union. Your personal details will be treated confidentially and will only be shared with other agencies for the purposes of credit referencing, debt recovery, legal requirements and fraud prevention.

## Diversity Monitoring Form (for Junior Member)

Any sensitive data collected and held is confidential and is passed on as general statistics. This information is held in the strictest confidence.

<b>Please circle the description that best fits your ethnic background</b>		
<b>White:</b>	<b>Black or black British:</b>	<b>Asian or Asian British:</b>
British	Caribbean	Indian
Irish	Somali	Pakistani
Gypsies & traveller	Other African Background	Bangladeshi
Other white backgrd	Other Black Background	Other Asian background
<b>Mixed/Dual Heritage:</b>	<b>Chinese or Chinese British:</b>	<b>Other ethnic group:</b>
White/Black Caribbean	Any Chinese background	Yemeni
White/Black African		Other ethnic group
White and Asian		
Other mixed backgrd		Prefer not to say

**Do you consider yourself to have a disability/limiting long-term illness?**

Yes  No  Prefer not to say

<b>What is your gender:</b>	
Male	Transgender
Female	Prefer not to say

**Where did you hear about us?**

Family or friends  Leaflet  Sheffield Homes/Housing  Job Centre   
 Advice Agency  Shop window  Other (please state) \_\_\_\_\_