



Sheffield Credit Union Limited
35 Townhead Street
Sheffield S1 2EB
Registered in England and Wales
Registered number: 637C

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Authority to Act – SCUBA

I give Sheffield Credit Union permission to share information about my account with the following person, for the purpose of managing my SCUBA account:

Name: _____
Job title: _____
Organisation: _____

This authority only gives the named person access to information about my SCUBA account. They will not be able to access any information about other services, such as loans and savings accounts, that I have with Sheffield Credit Union.

Signed: _____
Name: _____
Date: _____