

PLEASE USE BLOCK CAPITAL LETTERS
DEFNYDDIWCH PRIF LYTHRENAU

MEMBERSHIP NUMBER:
RHIF AELODAETH:

SAVEEASY
LLANELLI & DISTRICT CREDIT UNION LTD.
UNDEB CREDYD LLANELLI a'r CYLCH CYF.

Credit Union Registration No: 560 C
Rhif Cofrestru yr Undeb: 560 C

FSA Registration No: 213676
Rhif Cofrestru FSA: 213676

MEMBERSHIP APPLICATION
CAIS AM AELODAETH

TITLE(Mr.Mrs.Miss etc) _____ SURNAME _____
TEITL (Mr.Mrs.Miss ac ati) CYFENW

FIRST NAME _____ MIDDLE NAME (S) _____
ENW CYNTAF ENW (au) CANOL

ADDRESS _____
CYFEIRIAD

POSTCODE _____
CôD PoST

Tel No: (HOME) _____ (MOBILE) _____
RHIF FFÔN (CARTREF) (SYMUDOL)

e-mail address _____
cyfeiriad e-mail

NI Number _____ DATE OF BIRTH _____ / _____ / _____
RHIF YSWIRIANT CENEDLAETHOL DYDDIAD GENI

If you are in employment please could you fill in the details below:
OS YDYCH MEWN CYFLOGAETH LLENWCH YN ISOD Y MANYLION:

Name of Employer _____ ADDRESS OF EMPLOYER _____
ENW'R CYFLOGYDD CYFEIRIAD Y CYFLOGYDD

WORK PAYROLL NUMBER _____
GWAITH, RHIF PAYROLL

IN RECEIPT OF BENEFITS: YES / NO STATUS : _____

I hereby apply for membership of the above Credit Union and agree to abide by its rules. I declare that the information given by me is true and correct to the best of my knowledge.
Ceisiaf drwy hyn aelodaeth o'r Undeb Credyd uchod a chytunaf gadw at y rheolau. Datganaf fod y manylion a roddais yn y ffynflen hon yn gywir a gwir, yn ôl fy ngwybodaeth orau.

SIGNATURE _____ DATE: _____ / _____ / _____
LLOFNOD DYDDIAD

BANK DETAILS:

BANK NAME: _____ ACCOUNT IN THE NAME OF: _____

SORT CODE: _____ - _____ - _____ ACCOUNT NUMBER: _____

FOR OFFICE USE ONLY

ID DOCUMENTS PROCESSED YES / NO
DOGFENNI ID WEDI EU PROESU DO / NADDO

DEFNYDD SWYDDFA YN UNIG

PROCESSED BY: _____
LLOFNOD SWYDDOG YR UC:

SAVEEASY

LLANELLI & DISTRICT CREDIT UNION LTD. UNDEB CREDYD LLANELLI a'r CYLCH CYF.

FOR SHARE AND LOAN PROTECTION INSURANCE
YSWIRIANT AMDDIFFYN CYFRAN A BENTHYCIAD

NOMINATION FORM [IN CASE OF DEATH]

FFURFLEN ENWEBU [ACHOS MARWOLAETH]

MEMBERS' NEXT OF KIN

PERTHYNAS AGOSAF YR AELOD

Title _____ First Name _____ Surname _____
Teitl Enw Cyntaf Cyfenw

Address _____ Postcode _____
Cyfeiriad Côd Post

Tel. No. _____ Relationship _____
Rhif Ffôn Perthynas

I, _____ of (address): _____
R'wyf fi Full name Enw Llawn o (cyfeiriad):

_____ Postcode: _____
Côd Post

as a member of the above Credit Union hereby nominate:

Fel aelod or Undeb Credyd uchod yn enwebu:

Mr.Mrs. Miss etc. _____
Mr.Mrs. Miss ac ati. Full name Enw Llawn

Of (address) _____ Postcode _____
O (cyfeiriad) Côt Post

Relationship: *Perthynas* _____ Member No: *Rhif Aelodaeth* _____
(if Memb. Of Credit Union) (os yn Aelod o'r Undeb Credyd uchod)

As the person to whom there shall be transferred at my decease such property in the Credit Union as may be mine at the time of my decease, whether in shares or otherwise.

Fel y person i bwy y dylid, o ganlyniad fy marwolaeth, trosglwyddo fy eiddo yn yr Undeb Credyd uchod ar amser fy marwolaeth, ai cyfrannau neu fel arall.

Any special instructions: _____

Unrhyw gyfarwyddiadau arbennig

Members signature / *Llofnod yr Aelod:* _____

Witness signature / *Llofnod y Tyst:* _____

Witness Address _____

Cyfeiriad y Tyst

DATED THIS THE _____ DAY OF _____ 20_____
Dyddiwyd diwrnod o

If any of the above needs to be altered, please contact your Credit Union to ensure that the up to date information is held on file. *Os bydd angen newid y manylion uchod, cysylltwch a'ch Undeb Credyd er mwyn sicrhau fod gwybodaeth hyd yn hyn ar y ffeil.*

**ALL INFORMATION ON THIS FORM IS STRICTLY CONFIDENTIAL
MAE'R HOLL WYBODAETH AR Y FFURFLEN HON YN GWBL GYFRINACHOL**

CONSENT

By signing this form you are confirming that you have read this Data Protection Notice and that you are consenting to SAVEEASY holding and processing your personal data for the following purposes: Savings and Loans facility.

Name:

Address:.....

Telephone:.....

Email address:

- To keep you informed about news, events, activities and services;
- To contact you with surveys about current events;
- All of the above.

Please Tick

- By email []
- by text []
- by post []
- by phone []

You can grant consent to all the purposes; one of the purposes or none of the purposes.

Where you do not grant consent we will not be able to use your personal data.

If you do grant consent, please note you can withdraw your consent to all or any one of the above purposes at any time by contacting Data Protection Officer at saveeasy@btopenworld.com

SIGNED

DATED/...../.....