



**APPLICATION TO OPEN ACCOUNT FOR A PERSON TOO YOUNG  
TO BE A MEMBER**

Waterside Credit Union Ltd

**Minor Applicant Information**

**Name:** \_\_\_\_\_ **Membership Number:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Address:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Parent / Guardian Information**

**Name:** \_\_\_\_\_ **Membership Number:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Address:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Telephone No.:** \_\_\_\_\_

For and on behalf of the first-named person I, \_\_\_\_\_, the parent/guardian of the said \_\_\_\_\_ hereby apply to open an account in the name of the said \_\_\_\_\_ and I agree to abide by the rules of Waterside Credit Union Ltd regarding such account and declare that the information given by me on this form is true and correct to the best of my knowledge and belief.

**Signature of Parent/Guardian:** \_\_\_\_\_

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

It is important that you read and understand the section entitled Your information with this application form.

I (Minor) \_\_\_\_\_ aged \_\_\_\_\_ years hereby confirm the above application and I wish to open an account in Waterside Credit Union Ltd.

I authorise you:

- to open the account in my name; and
- to process the information I have provided you with for the purposes of maintaining my account with you.

**Signature:** \_\_\_\_\_

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

**N.B. - Rule 18 of Standard Rules for Credit Unions (Northern Ireland) reads:**

18. Two months before a minor depositor attains the age of 16 the credit union shall serve upon him and his signing parent or guardian a notice requiring the minor on attaining that age either to withdraw the balance of the account or to join the credit union so that the balance can be transferred to shareholding in his name in the credit union; if the minor depositor takes no action he shall be deemed to have applied for membership of the credit union and after deduction of the normal fee on joining, the balance shall be transferred to shareholding in his name. The transferring minor will not be permitted to transact as a member until he has complied in full with Rule 6 (3) and Rule 7.

**Tax Residency for the purposes of the Common Reporting Standard**

- **If you are tax resident in another country, please provide your Tax Identification Number (“TIN”) and Country of Tax Residence**

- 1. TIN\*  
Country of Tax Residence\*
- 2. TIN\*  
Country of Tax Residence\*

I confirm that the information provided is true and correct to the best of my knowledge, and that if my circumstances change, I will notify the credit union:

Signature *(of Applicant or Parent/ Guardian on behalf of Minor)*

..... Date: .....

- **If you are not tax resident in another country, please sign the following**

I wish to declare that I am not resident for tax purposes in any other country, and that if my circumstances change, I will notify the credit union:

Signature *(of Applicant or Parent/ Guardian on behalf of Minor)*

..... Date: .....

**\*Mandatory Field**

**\*\*This information is being sought for the purposes of reporting obligations under the Common Reporting Standard (CRS), as provided for by the International Tax Compliance Regulations 2015. The information required to be reported under the CRS, including name, address, TIN, account number, account balance and payments on the account will be provided to the HMRC and may be exchanged securely with another Competent Tax Authority in your jurisdiction of tax residence, but such information will at all times be treated with the strictest confidentiality as required by the Data Protection Legislation. Only data that is legally required to be reported will be provided to the HMRC. For more information on this, please speak to your credit union or see <http://www.oecd.org/tax/transparency/automaticexchangeofinformation.htm>**

**Financial Services Compensation Scheme Information Sheet and Exclusions List Declaration**

Please tick the box below to confirm the following:

**I acknowledge receipt of the Information Sheet and Exclusion List**

Applicant’s Signature: .....

**Account Opening Privacy Notice**

Please take time to read the account opening privacy notice of the credit union which outlines how and why we process your personal data. A copy is available for you to take away and you can access the privacy notice at any time on [www.watersidecreditunion.co.uk](http://www.watersidecreditunion.co.uk)

Please tick here to confirm that you have received a copy of our Account Opening privacy notice

For Credit Union Office Use Only

Application approved and details verified in accordance with the Standard Rules for Northern Ireland

|              |                        |
|--------------|------------------------|
| Approved by  |                        |
| Signature    |                        |
| Position     | (Membership Committee) |
| Date:        |                        |
| Book Number: |                        |

(THIS SECTION TO BE COMPLETED BY THE CREDIT UNION)

**Evidence of Identification**

Original documentation only - must be scanned

(Complete at least one of or more of the following:

Current Valid Passport

Birth Certificate(for a minor/or evidence of name change only)

Other \*

\* Please Specify \_\_\_\_\_

**Evidence of Address Verification:**

Original documentation only - must be scanned

Must be date in the last 6 months and in full name e.g. Joe Bloggs not J Bloggs

(Complete at least one of the following:)

Current Utility Bill (e.g. Gas/Electricity, Telephone(Landline or Broadband only - not mobile phone bill) )

Official Document from a Government Body

Original Bank or Building Society Statement

Current Insurance Document (e.g. House/Motor insurance)

Other \*

\* Please Specify (i.e. in genuine cases where the above cannot be presented)

\_\_\_\_\_