



APPLICATION FOR MEMBERSHIP

W.B.R. CREDIT UNION LTD

Member's No.

.....

Applicant's Name

Address

Date of Birth Occupation

I hereby apply for membership of and agree to abide by the rules of W.B.R. Credit Union Ltd, and declare that the information given by me on this form is true and correct to the best of my knowledge and belief and that I am not, nor have not, been a member of any credit union other than those listed overleaf.

Date

National Insurance Number				

Applicant's Signature

Proposed by No

Seconded by No