

FLAMESAVERS CREDIT UNION LTD

FOR ALL EMPLOYEES OF CHESHIRE, STAFFORDSHIRE & GREATER MANCHESTER FIRE SERVICES
Flamesavers CU Ltd, The Fire Station, Lower Bethesda Street,
Hanley, Stoke-on-Trent, Staffs. ST1 3RP
Tel: 01785 898907 Fax: 01782 209029

APPLICATION FOR MEMBERSHIP

Applicants Details	Title: Mr/Mrs/Miss/Ms Surname
	Forename/s - Date of Birth
	Address.....
 Post Code:
	Tel: No - Mobile No:
	Service No - Nat Ins No:..... Pay No:.....
	Station/Workplace Tel No -
	If a Retainer please state basic take home Retainer Fee £.....
	E-mail address.....
	Please send correspondence to: (delete as necessary) Home Address / Workplace Address:-

Applicants Declaration	I hereby apply for membership of Flamesavers Credit Union and agree to abide by its rules. I declare that the information given by me on this form is true and correct to the best of my knowledge and belief.
	As a member of the above Credit Union I hereby authorize Payroll Dept to deduct a payment of £ from my pay. This to take effect from (date)
	Applicants Signature - Date -
	Witness Signature - Date -

Credit Union use only:	Approved by	Date
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Form of Nomination	As a member of the above Credit Union I hereby nominate as my next of kin:-
	(Full Name)
	(Address)

	as the person to whom there shall be transferred to, at my decease, such property in the Credit Union as may be mine at the time of my decease, whether in shares or otherwise:
Applicants Signature - Date -	
Witness Signature - Date -	
(Must not be the Nominee)	

Bank Details	Account In Name of:-.....
	Account No - Sort Code -