

Junior Savers Membership Application Form

Membership No.

STEVENAGE CREDIT UNION LTD



11 The Hyde, The Hyde Shopping Centre, Stevenage, Herts SG2 9SD



Supported by:



Supported by:



Young Saver Junior Account



‘Money Monsters, watching over your Savings’

Childs First name:	
Childs Surname:	
Address:	[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]
Postcode:	
Home Telephone No:	
Mobile Telephone No:	
Date of Birth	
Email Address	
I hereby apply for membership of Stevenage Credit Union Ltd.	
Signature :	
Date:	

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Parent/Carer



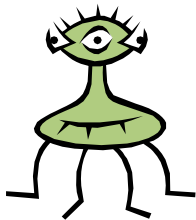
I give permission for a credit union account to be opened for:

Childs Name:	
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I also give permission for the head teacher to confirm that he/she is a pupil attending this school. I give permission for any photos that are taken to be used in Press releases/adverts or promotions of my child.

Parent/Carer Name:	
Parent/Carer Signature	

Membership Number	
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Money Monsters....Watching over your savings

