Minor Membership Application

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| 🞏 NEW | 🞏 UPDATE | Member # |
| **Important Information About Account Opening Procedures** | | |
| To comply with regulatory standards, we obtain, verify, and record information that identifies each person when opening a new account. **What this means for you: When you open an account, we will ask for your name, address, date of birth, country ID or passport. We will also take your photograph for our records.** | | |

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| **Member/Owner Information** | | |
| 🞏 Update | | |
| Minor Child’s Name: | Date of Birth: | Gender: |
| Physical Address: | District of Birth: | Place of Issue: |
| Guardian Name as listed on ID Card: | Relationship to minor: | |
| Guardian Mailing Address: | ID Type: | Serial Number: |
| City/State/Zip: | ID Number: | Place of Issue |
|  | Date of Birth: | Gender: |
| Primary Phone: | Secondary Phone: | |
| E-mail address: |  | |
| Employer: | Occupation/Title: | |

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| **Agreement** |
| By signing or otherwise authenticating, I/we agree to the bylaws of (credit co-operative) and to any amendments which are incorporated herein. All of the terms, conditions, form of account ownership, account selection and other information indicated on the Membership and Account agreement applies to all of the accounts listed unless the (credit co-operative) is notified in writing of a change.  I commit to remit my share contribution (insert minimum) per month or more, on or before the 10th day of every month. |

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| Member/Owner Date | | | |
| Guardian Date | | | |
| For official Use: |  |  | |
| Date of admission: | | | Approved by management committee meeting minutes no \_\_\_\_\_\_\_\_\_\_\_\_ on date \_\_\_\_\_\_\_\_\_\_\_\_ |
| Entrance Fee paid on: | | | First Share paid on: |
| Membership Number Assigned | | | Secretary Signature: |