



**APPLICATION FOR MEMBERSHIP – NORTHERN IRELAND**  
**IRVINESTOWN CREDIT UNION LIMITED**

Membership Number: .....

Name: .....

Address: ..... Occupation .....

.....

.....

Telephone: ..... Date of Birth ..... / ..... / .....  
*Day Month Year*

If the applicant is less than five years at the above address, please state the immediate prior address:

.....

.....

.....

I hereby apply for membership of an agree to abide by the rules of the above credit union, and declare that I am not or have been a member of any credit union other than those listed as follows:

..... Credit Union Limited

..... Credit Union Limited

The information given by me in this form is true and correct to the best of my knowledge and belief. I understand that any false or misleading information given by me in connection with my application for or my membership with the credit union may result in termination of my membership, apart from any other legal sanctions that may apply.

Proposed by: ..... Membership Number .....

Seconded by: ..... Membership Number .....

## Consent to use and disclosure / Data Protection Act, 1998

The Credit Union may make searches about you at credit reference agencies

The agencies will record details of the search whether or not the application proceeds. The Credit Union may use credit scoring methods to assess this application and to verify identity. Credit searches and other information which is provided to us and/or the credit reference agencies, about you and those with whom you are linked financially associated. This information may also be used for debt tracing and the prevention of money laundering as well as the management of your account.

If you have an account with the Credit Union we may give details of your account and how you manage it to credit reference agencies.

The information which the Credit Union and other lenders provide to the credit agencies may be used by other organisations to:

- i. verify your identity if you or your financial associate applies for other facilities including all types of insurance applications and claims
- ii. make credit decisions about you, your partner, other members of your household or your business
- iii. trace your whereabouts and recover payment if you do not make payments that you owe
- iv. conducts checks for the prevention and detection of crime including fraud and / or money laundering
- v. manage your personal, your partner's and / or your business account (if you have one)
- vi. undertake statistical analysis and system testing

I understand that under the Data Protection Act, 1998 (the "DPA"), my consent may be required for the Credit Union to process personal data that it may have in its possession concerning me (including disclosure to third parties). I note that this personal data may include sensitive personal data, such as data about my health, within the meaning of the DPA, the processing of which requires my explicit consent.

For the purpose of assessing my application for membership, assessing any loan applications which I may make to you and generally for administering and monitoring any accounts I have with the Credit Union, including any loan accounts I have from time to time with you:

1. I consent:

- i. To you seeking information concerning applications for loans and my credit history from the date of my original consent from any credit union and for that purpose you may disclose and relevant information in any loan application which I may make to you or which you may have concerning me to any such credit union;
- ii. To any credit union disclosing information to you concerning applications for loans and my credit history from the date of my original consent with any such credit union;
- iii. To you disclosing any information in any application (including loan applications) or in respect of any account or transaction of mine with the Credit Unions from the date of my original consent to officers or employees of the Irish League of Credit Unions for the purpose of fulfilling our requirements and under the Savings Protection Scheme if such a scheme is operated on behalf of the Credit Union by the Irish League of Credit Unions; and
- iv. To the processing of any information relating to me, either contained in this form or any other form or application, for the purpose of assessing applications and administering any accounts I maintain with the Credit Union.

2. From time to time, the Credit Union, or third parties selected by the Credit Union, may use your details to inform you of goods and / or services which may be of interest to you.

The use of your details for marketing purposes will depend in the preferences that you express below:

**Opt-In (Marketing by e-mail, text message and fax)**

I consent to the Credit Union, or third parties selected by the Credit Union, informing me of goods or services that may be of interest to me, by email, text or fax.

**Opt-Out (other forms of marketing)**

Please tick the box opposite if you do **not** want the Credit Union or third parties selected by the Credit Union, to inform you by phone or letter of goods or services that may be of interest to you.

Please note that you have the right to access personal data held about you by the credit union and to correct any inaccuracies in such data.

**Applicant's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print name:** \_\_\_\_\_

**Witnessed by:** \_\_\_\_\_

**Print name:** \_\_\_\_\_



**APPLICATION FOR MEMBERSHIP – NORTHERN IRELAND (contd.)**

**IRVINESTOWN CREDIT UNION LIMITED**

(THIS SECTION TO BE COMPLETED BY THE CREDIT UNION)

**Evidence of Identification**

(complete one or more of the following:)

(Copies must be Attached)

Current Valid Passport

Current Valid Driving Licence

Current Valid I.D. Card (with photo)  
e.g. from known employer, school, college, etc.

Personally known to \_\_\_\_\_  
(Signature of Officer)

\_\_\_\_\_  
(Print name of Officer)

\*Other

\*Please specify \_\_\_\_\_

**Evidence of Address Verification**

(complete one or more of the following:)

(Copies must be Attached)

Original Recent Household Bill

Electoral Register

Telephone / Street Directory

Original Bank or Building Society Statement

\*Other

\*Please specify \_\_\_\_\_

**Application approved and details verified in accordance with the Standard Rules by:**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Board of Directors/Membership Committee/Membership Officer)