

# Membership Application Form

(PLEASE COMPLETE ALL SECTIONS IN BLOCK CAPITALS)

Account number

       

**Go Paperless!** Save time, energy and the environment. Join us online through our digital application form.

[www.mfcu.ie/join](http://www.mfcu.ie/join)



## Data Protection & Data Privacy Statement

The details provided in this application form together with any other information that is furnished to us in connection with this application will be retained and processed by Member First Credit Union Ltd. in accordance with our Data Privacy Statement. Please take time to read this document which is available to you at [www.mfcu.ie](http://www.mfcu.ie) or in any of our branches.

## Section 1: Personal Details

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Date of Birth: \_\_\_ / \_\_\_ / \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

Email (personal email address only - "info@..." not permitted) : \_\_\_\_\_

*MFCU spent €51,836 on paper and €86,109 on postage last year sending Regulatory and Information Notices (not marketing), which we are required to do under various Credit Union Regulations. You can help us to reduce these costs and also help the environment by consenting to receive your Regulatory and Information Notices (not marketing) by email. These cost savings can help us allocate more funds to our community initiatives and help the local and global environment.*

Tick to consent. Non Marketing Regulatory and Information Communication: I consent to receive (for regulatory notices and information purposes only) the following documents to my personal email address; Annual General Meeting Notices (AGM), Special or Extraordinary General Meeting Notices (S/EGM), Section 130 Notices- Transfer of Engagements Notices, and any other regulatory/information notices which may occur from time to time. I am aware that I can opt out from this at any stage by emailing [dpo@mfcu.ie](mailto:dpo@mfcu.ie).  
Note: Consenting or opting out will not affect your application for membership.

Accommodation: Home Owner  Renting  Living with Parents/Relative  Other

Present Address: \_\_\_\_\_

Eircode: \_\_\_\_\_

If less than 5 years at current address, please indicate previous home address:

\_\_\_\_\_  
\_\_\_\_\_

Nationality: \_\_\_\_\_ Country of Residence: \_\_\_\_\_

PPS/Tax ID Number: \_\_\_\_\_

Irish Residence Permit (IRP) Number: \_\_\_\_\_ IRP Valid Until: \_\_\_ / \_\_\_ / \_\_\_\_\_

(IRP is not required for Irish, EU and Schengen citizens)



Account Number

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Occupation: \_\_\_\_\_ Position Held: \_\_\_\_\_

Employment Type: Full-Time  Part-Time  Self-Employed  Unemployed  Student  Retired

Pay Frequency: Weekly  Fortnightly  Monthly

Employer Name: \_\_\_\_\_ Date Commenced Employment: \_\_\_ / \_\_\_ / \_\_\_

Employer Address: \_\_\_\_\_

## Section 2: Form of Nomination

I hereby nominate:

| Name | Address | Contact Number | Relationship |
|------|---------|----------------|--------------|
|      |         |                |              |
|      |         |                |              |
|      |         |                |              |

**A nomination can only be made by members who are 16 or older.**

**The person you nominate may not witness your signature.**

To become entitled to such property in the credit union which I may have at the time of my death, whether in savings, insurance or otherwise not exceeding the limit of the amount for the time being authorised by law.

Member's Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_ / \_\_\_ / \_\_\_

Witnessed by (CU Officer) : \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

Nomination instructions inputted by: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

## Section 3: Anti-Money Laundering Compliance

We are required under the various Anti-Money Laundering and Countering the Financing of Terrorism Acts to obtain the following information.

### BENEFICIAL OWNER

I declare that as the account holder I am the beneficial owner of the funds held in this account. Yes  No

If you ticked 'No' above, please specify the beneficial owner of the account: \_\_\_\_\_

### BUSINESS RELATIONSHIP

Reason for opening account. Shares  Loans

Account Number

Account number input boxes

METHOD OF SAVING TO YOUR ACCOUNT

EFT In Branch Direct Debit Other please specify:

POLITICALLY EXPOSED PERSON

Are you, or is a member of your immediate family, a Politically Exposed Person (PEP) either in Ireland or abroad? Yes No

\*A politically exposed person is a person who holds or has held within the previous year a prominent public position (e.g. TD's, Senators, heads of state, high-ranking government or army officials, government minister, high court judge etc.) If you are unsure whether you are a PEP or not, please ask a member of staff.

For full details about the Criminal Justice (Money Laundering and Terrorist Financing) Act 2010 you can visit

http://www.irishstatutebook.ie/eli/2010/act/6/enacted/en/html

Section 4: Tax Residency for the purpose of the Common Reporting Standard\*\*

Are you a tax resident in the Republic of Ireland? Yes No

If you are not a tax resident in the Republic of Ireland please provide your Tax Identification Number ("TIN") and Country of Residence.

1. TIN\*

TIN input boxes

Country of Tax Residence\*

I confirm that the information provided is true and correct to the best of my knowledge, and that if my circumstances change I will notify Member First Credit Union Ltd.

Signature:

\* Mandatory Field

This information is being sought for the purposes of reporting obligations under the Common Reporting Standards (CRS), as provided for by Section 891F of the Taxes Consolidation Act 1997. The information required to be reported under the CRS, including name, address, TIN, account number, account balance and payments on the account will be provided to the Revenue Commissioners and may be exchanged securely with another Competent Tax Authority in your jurisdiction of tax residence, but such information will at all times be treated with the strictest confidentiality as required by applicable data protection laws. Only data that is legally required to be reported will be provided to the Revenue Commissioners. For more information on this, please speak to your credit union or contact Revenue at aeoi@revenue.ie or see https://www.oecd.org/tax/automatic-exchange/.

Section 5: Deposit Guarantee Scheme

The Depositor Information Sheet provides important information in relation to the Deposit Guarantee Scheme and your related rights. The sheet is provided to you in conjunction with your application for membership.

Initial here:

Initial box

Please initial the box to confirm you have received the Depositor Information Sheet.

Section 6: European Communities (Payment Services) Regulations 2018

Please initial the box to confirm you have received your 'Framework Contract' and associated information for the purpose of the Regulations.

Initial here:

Initial box

## Section 7: Communication & Marketing

From time to time, Member First Credit Union may wish to inform you of goods, services, products, competitions, promotional offers and news which may be of interest to you. The use of your details for these purposes will depend on the preferences that you express hereunder.

I consent to Member First Credit Union informing me of goods and services that may be of interest by:

Email  SMS  Phone  Post

Signature: \_\_\_\_\_

You can update your preferences or opt out at any time by contacting us by letter or by email at [dpo@mfcu.ie](mailto:dpo@mfcu.ie). Please note that the credit union may still contact you where there is a legal or legitimate interest basis for that contact.

## Section 8: Declaration

I hereby apply for membership of Member First Credit Union and agree to abide by the rules of the credit union. The information given by me on 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 this application for membership of Member First Credit Union Ltd. may result in termination of my membership, apart from any other sanctions that may apply.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_\_\_

Membership of Member First Credit Union Ltd. is subject to approval by the Membership Committee.

### FOR CREDIT UNION USE ONLY:

Witness: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_\_\_

| Evidence of Identification (copies must be attached)       | Please <input checked="" type="checkbox"/> | Evidence of Address (copies must be attached)     | Please <input checked="" type="checkbox"/> |
|--|--|---|--|
| Current Valid Passport                                     |  | Original Recent Household Bill                    |  |
| EU National Identity Card                                  |  | Statement from a Credit Institution               |  |
| Irish Residence Permit                                     |  | Correspondence from a State Agency or Public Body |  |
| Birth Certificate + another document                       |  | Correspondence from an Insurance Company          |  |
| Current Valid Driving Licence (EU, Schengen or comparable) |  | Other, please specify:                            |  |
| Other, please specify:                                     |  |   |  |
| Evidence of PPSN   | Please <input checked="" type="checkbox"/> | Other   | Please <input checked="" type="checkbox"/> |
| P60, P45, P21  |  | Photograph taken                                  |  |
| PAYE Notice of Tax Credits                                 |  |   |  |
| Tax Free Allowance Certificate                             |  |   |  |
| Payslip  |  |   |  |
| Official Correspondence from Revenue                       |  |   |  |
| E111 Card  |  |   |  |
| Medical Card, Drugs Payments Scheme Card                   |  |   |  |

We cannot accept Public Service Cards

Application approved and details verified in accordance with Standard Rules by (Membership Committee):

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_\_\_



(01) 851 3400



[www.mfcu.ie](http://www.mfcu.ie)



[info@mfcu.ie](mailto:info@mfcu.ie)

**Member First**  
CREDIT UNION  
the next generation credit union