



1. Child's Details

Title: _____

Full Name: _____

Date of Birth: _____

Address: _____

Postcode: _____

2. How Did You Hear About Us?

- ☐ Friend/Family ☐ Existing Member ☐ Facebook/Social Media ☐ Website
☐ Employer ☐ Community Event ☐ Leaflet/Poster ☐ Other _____

3. Adult signatory details

Parent/guardian operating on behalf of the applicant under the age of 18

Name: _____

Address: _____

FVCU membership number (if applicable): _____

Postcode: _____

Relationship to child: _____

Email: _____

Telephone: _____

4. Proof of Identity

One required
Passport ☐
Birth Certificate ☐
Other ☐

5. Declaration

I apply for membership of Forth Valley Credit Union and declare that:

- The information provided is true and complete.
- I agree to abide by the Rules of the Credit Union.
- I confirm that the applicant's parent/legal guardian is aware of this account.

6. Communication Preferences

☐ Email ☐ SMS/Text ☐ Telephone ☐ Post

☐ I am happy to receive information about products, services and member updates on behalf of the applicant under the age of 18.

Parent/Guardian Signature: _____

Print Name: _____

Date: ____ / ____ / ____

Office Use Only

Membership Number: _____

Date joined: _____

Processed by: _____