



APPLICATION FOR A JOINT ACCOUNT

In order to set up a joint account, both parties must be individual members of the credit union. Please fill both individual's details below.

JOINT MEMBERSHIP NUMBER _____

1st Applicant

Full Name _____

Account Number _____

Address _____

_____ Post Code _____

Telephone No. _____

2nd Application

Full Name _____

Account Number _____

Address _____

_____ Post Code _____

Telephone No. _____

We hereby apply for a joint savings account with Pollok Credit Union and agree to abide by the rules of the said credit union. This joint account is to be operated on the signature of **either** party to the account. Both signatures will be required to close the account. We understand that, in the event of the death of either party to the account; the account will belong to the surviving account holder.

1st Applicant

Signature _____ Date _____

2nd Applicant

Signature _____ Date _____