Classic Account Application Form



Please complete this form using clear block capitals using a ball point pen. Fields marked with an * are mandatory.

Credit Union de	tails							
London Community Bank Credit Union Office Civic Centre High Street Uxbridge Middlesex UB8 1UW				BAN Fair savin	LONDON COMMUNITY BANK Fair savings and loans Part of Hillingdon Credit Union Ltd			
Credit Union Member details								
Title: *		Gender:* Date of birth:			(dd/mm/yyyy)			
First name: *		Initial(s):	Last name: *	*				
Home phone:	phone:			e:*				
Address: *	dress: *							
			-		, , , , , , , , , , , , , , , , , , , 		,	
Postcode: *		Time at addr	ess: *	(Years)		(Months)		
Email address:								
Previous address if less than 12 months								
Address								
Postcode:			Time at addr	ess:	(Years)		(Months)	
Account Holders Agreement								
Please print your name: *								
Your signature: *				Date*:				
FOR COMPLETION BY CREDIT UNION AUTHORISED SIGNATORY Remember to enter the Promotional Code (Insert Code) on all card applications where applicable								
Name of authorising sig	Signature:	Signature:						
CU Members Number/Reference Number:			Date:	Date:				
*Documents checked and verified by CU:								
*These documents are available to Contis Group on request.								



Your Visa Engage classic will be issued by Contis Financial Services Ltd who is authorised by the Financial Services Authority to issue e-money (Firm Reference Number: 900025) and is a member of Visa.