



**TEXTEL CREDIT UNION
CO-OPERATIVE SOCIETY LIMITED**

85 Henry Street Port-of-Spain,
Republic Of Trinidad and Tobago West Indies

MEMBERSHIP APPLICATION

PHOTO

PERSONAL INFORMATION

Surname: _____ Middle Initial: _____ First Name: _____

Home Address: _____

Mailing Address: _____

Telephone No: Home _____ Mobile _____ Email Address: _____

Two (2) forms of Proof of Address: ID [] DP [] PP [] Utility Bill [] Other []

Two (2) forms of ID: ID No. _____ DP No. _____ Passport No. _____

Birth Paper Pin #. _____ Date of Birth (M/D/Y): _____ Gender: (Male/Female/Other) _____

Civil Status: Single [] Married [] Divorced [] Common Law [] Widowed []

Nationality: _____ Place of Birth: _____

EMPLOYMENT INFORMATION

Status: Permanent [] Temporary [] Contract [] Management [] Other []

End date for Temporary / Contract Employment (M/D/Y): _____

Employer: _____ Occupation: _____

Employer's Address: _____

Date of Employment _____ Employer's Telephone No. _____

BIR File No. _____ National Insurance No. _____

Name of School (Child Applicant). _____

Monthly Income: \$ 1501 - \$5000 [] \$5001 - \$10,000 [] \$10,001 - \$15,000 []
 \$15,001 - \$20,000 [] \$20,001 - \$25,000 [] Over \$25,000 []

Proposed Monthly Savings: Shares \$ _____

Deposits \$ _____

Total \$ _____

I hereby apply for membership in the **TEXTEL CREDIT UNION CO-OPERATIVE SOCIETY LIMITED** and agree to be bound by its By-Laws and amendments thereof. I also certify that the information given above is true and correct.

Signature of Applicant: _____ Date (M/D/Y) _____

Name of Recommender (Block Letters) _____

Recommender's Account Number: _____

Recommender's Signature: _____

MEMBER DECLARATION

1. A "politically exposed Person is a person who is or was entrusted with important functions such as:
 - a) A current or former senior official in the executive, legislative, administrative or judicial branch of government, whether elected or not;
 - b) A senior official of a major political party;
 - c) A senior executive of government-owned commercial enterprise;
 - d) A senior military official;
 - e) An immediate family member of a person mentioned in paragraphs (a) to (d) meaning the spouse, parents, siblings or children of that person and the parents, siblings and additional children of the persons
 - f) A close personal or professional associate of the person mentioned in (a) to (d).

Are you now or have you ever been the holder of public or political office in any company, such as, Head of State, Prime Minister, Head of Government, Government Minister, Parliamentary Secretary, Permanent Secretary, Senior Judicial Official, Senior Military Official, Senior Government Official, Chairman, Director, Commissioner or Chief Executive Officer of a state owned company, Commission or Regulatory Body, Member of the Tobago House of Assembly, Regional Corporation, Statutory Authority or a Senior Member of a political party or a senior politician?

Yes [-] No [-]

If yes please complete the statement of Affairs below.

CURRENT ASSETS	\$	CURRENT LIABILITIES	\$
Cash on Hand/Bank		Loans=> 5yrs	
Stocks Bonds etc.		Short term Loans	
Real Estate (Market Value)		Mortgage Loans	
Motor Vehicle/s(Market Value)		Credit Cards	
Household (Furniture/Fixtures, Computer etc.)		Hire Purchase	
Other Assets (Life Ins etc.)		Other	
Total Assets	\$	Total Liabilities	\$

NET WORTH = \$ _____

NET WORTH = (Total Assets - Total Liabilities)

DEFICIT = \$ _____

DEFICIT = (Total Liabilities - Total Assets)

2. Have you ever been a member of a terrorist group?

Yes [] No []

If yes, give details _____

3. Do you now belong to any terrorist group?

Yes [] No []

If yes, give details _____

4. Do you reside or work from time to time in a foreign country?

Yes [] No []

If yes, indicate foreign address _____

I _____ declare and confirm that the information given in this application for credit union service(s) is true and correct. I also confirm that I am not engaged in money laundering, drug trafficking, fraud, identity theft or any other crimes or illicit activities. I am aware that I am required by the account agreement to deposit only good items to my account and to refrain from using the account for money laundering, terrorist financing, any other criminal activities, specified offences or for furthering criminal purposes or conducts. I have not assumed the identity of any other person and the funds/deposits are beneficially owned by me and no one else.

I promise to abide by the terms of the account (s) agreement and with the statutory provisions and by-laws governing the operations of TEXTEL Credit Union, and I consent to all enquiries the Credit Union may make about me and to the retention of this application and all documents tendered by me in support of this application by the credit union.

Signature of Applicant _____ Date Signed ____/____/____

NOMINATION OF BENEFICIARY

1. Beneficiary's Name: _____ Relationship: _____

Home Address: _____

Work Address: _____

Telephone No: Home: _____ Mobile: _____

Date of Birth: _____ Email Address: _____

Identification No: ID _____ DP _____ PP _____

2. Beneficiary's Name: _____ Relationship: _____

Home Address: _____

Work Address: _____

Telephone No: Home: _____ Mobile: _____

Date of Birth: _____ Email Address: _____

Identification No: ID _____ DP _____ PP _____

I hereby nominate the above person(s) to receive the benefits which may accrue to me in the Society, under the statutory provisions governing the operations of Financial Cooperatives in Trinidad and Tobago.

Applicant's Signature: _____ Date: _____

FOR OFFICIAL USE ONLY

Date Received: (M/D/Y) _____

Member Classification: _____

Member's Risk Profile: High [] Medium [] Low []

UN Sanction 1267 & OFAC Lists Checked Yes [] No []

Reviewed By Compliance Officer: Date: _____ Signature: _____

Member Application was reviewed By Board: Yes [] No [] Date: _____

Member Application was Approved [] Rejected []

Secretary's Signature: _____

President's Signature: _____