

# Sion Mills Credit Union Limited

13 Marshalls Row - Sion Mills - Co. Tyrone

Tel: (028) 816 58682 - Email: sionmills@btconnect.com

## OPENING HOURS:-

Tuesday - 12 noon to 2-00 p.m.

Wednesday - 12 noon to 2-00 p.m.

Thursday - 12 noon to 2-00 p.m.

Friday - 12 noon to 2-00 p.m.

Saturday - 10-00 a.m. to 12.00 noon

OFFICE USE ONLY

ACCOUNT NO.

Ok . . . So you want to join us at Sion Mills Credit Union Limited and start saving - that's great!

We'll be round to your school every week to collect all those pennies and pounds you want to save up. BUT FIRST WE NEED TO MAKE YOU A MEMBER!

To do this we need the following items:

**Your Birth Certificate • Your Parent/Guardian's Identification  
Household Bill • Bank Statement** (These will be returned in the wallet provided)

### You Fill In:

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

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

Date of Birth: \_\_\_\_\_

### Parent/Guardian Fill In:

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

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

Date of Birth: \_\_\_\_\_

**STOP IMPORTANT PART / NOW**, time to get an adult's help, this is the important part for you guys!

For and on behalf of the first name person I, \_\_\_\_\_

the parent/guardian of the said \_\_\_\_\_ hereby apply to open an

account in the name of the said \_\_\_\_\_ and I agree to abide by the rules of Sion Mills Credit Union Limited regarding such account and declare that the information given by me on this form is true and correct to the best of my knowledge and belief.

Dated the \_\_\_\_\_ Signed \_\_\_\_\_ Parent/Guardian

I (minor) \_\_\_\_\_ aged \_\_\_\_\_ years hereby confirm the above application and I wish to open an account in Sion Mills Credit Union Limited.

OFFICE USE ONLY

Approved \_\_\_\_\_ Date \_\_\_\_\_

**Now bring this back to Sion Mills Credit Union ~ Thank You**