

Change of Member Details

Newport Credit Union. • 5 Market Arcade • Newport • South Wales • NP20 1FS
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Please complete the following in **BLOCK CAPITALS**

Membership No: _____

Title: _____

Surname: _____

Forename(s): _____

Please change my name to:

Title: _____ Surname: _____ Forename(s): _____

Old Signature: _____

New Signature: _____

Note: Change of signature means that the passbook also needs to be changed - please forward it with this form. Supporting information may be sought in addition to the above if deemed necessary.

Please change my address or my contact details to:

Address: _____

Postcode: _____

Tel: _____ E-mail: _____

Note: For a change of address you must supply us with a proof of new address eg. bank statement, utility bill or benefits form.

Please change my nomination details for the Life Insurance to:

Title: _____ Surname: _____ Forename(s): _____

Address: _____

Postcode: _____ Relationship: _____

Note: Alterations to this section require a witness to your signature

Witness Title: _____ Witness Surname: _____ Witness Forename(s): _____

Witness Address: _____

Postcode: _____

Witness Signature: _____ Date: / /

Please tick this box if you are happy to receive information and statements by e mail instead of post. We will not disclose your details to third parties.

Note: To confirm any of the above member detail changes, please sign below.

Your signature _____

Date / /