

- I wish to apply for a VISA International Debit Card
 I wish to apply for an online account & the Mobile app

INDIVIDUAL MEMBERSHIP APPLICATION

ACCOUNT NO _____

DATE _____

All Fields Must be Completed in BLOCK LETTERS

1. DETAILS OF APPLICANT

Title: Mr. Mrs. Miss Ms. Other _____

Gender: Male Female

FIRST NAME

MIDDLE NAME

LAST NAME

Do you have an alias? Yes No If Yes, please state here _____

Marital Status: Single Married Widowed Separated Divorced Common Law

Date of Birth: _____ / _____ / _____ NIC/Social Security No : _____
DD/MM/YYYY

National ID No. _____	Issue Date DD / MM/ YYYY _____	Expiry Date DD / MM/ YYYY _____	Country of Issuance _____
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Driver's License No. _____	Issue Date DD / MM/ YYYY _____	Expiry Date DD / MM/ YYYY _____	Country of Issuance _____
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Passport No. _____	Issue Date DD / MM/ YYYY _____	Expiry Date DD / MM/ YYYY _____	Country of Issuance _____
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Resident Non-Resident Country of Birth: _____ Nationality: _____

Country of Residence: _____ E-Mail Address: _____

Current Residence Address: - _____

Mobile No.: _____ Home No.: _____

Mailing Address: _____

Highest Level of Education: Primary Secondary Degree Post Graduate Other _____

2. What is your reason for opening the account? (Select all that apply)

- Savings Loans FIP Medical Insurance VISA Debit Card Online Service
 House & Vehicle Insurance Other _____

3. How did you get to know about the credit union:

Family Television Website Organisation Visits
 Co-workers Radio Social Media Friends

4. Are you a member of any other credit union (s)? Yes No Account No.(s) _____

If yes, provide Credit Union name(s): _____

5. FINANCIAL INFORMATION

Please indicate below how many deposits/withdrawals you expect to make per month

[Deposits] Amount (\$) _____ Frequency (weekly, monthly, yearly)

[Withdrawals] Amount (\$) _____ Frequency (weekly, monthly, yearly)

Source of Wealth: Employment/Salary, Business Ownership, Inheritance/Gift,
 Investments/Dividends, Property/Real Estate, Retirement/Pension
 Other _____

Nature of Payments: Cash Cheques Salary Deduction Wire Transfer

6. EMPLOYMENT INFORMATION

Employer: _____ Department/Section: _____

Work Address: _____

Work Tel. No.: _____ Date of Employment: _____

Occupation: _____

Employment Status: Permanent Temporary Contract Self Employed Unemployed Retired Student

Business Activity (If Self Employed) _____

Source of Other Income (If applicable) _____

Average Monthly Income: Below \$1500 \$1500-\$3499 \$3500- \$5499 \$5500-\$7499 \$7500 & Over

7. SPOUSE/RELATIVE INFORMATION

Name of Spouse: _____ Next of Kin: _____

Residence: _____ Residence: _____

Tel No.: _____ Tel No.: _____

8. PROPOSED BY:

Name _____ Account No _____

Relationship to Applicant:

- Parent Brother/Sister Friend *
- Grandparent Aunt/Uncle Colleague *
- Son/Daughter Niece/Nephew
- Spouse/Common Law Partner

Note: * Only if eligible to join through workplace

I understand that any false information will nullify the nominee's membership immediately.

Signature of Proposer _____

9. Do You hold a junior (SOCA) account with Jannou? Yes No If Yes, provide Account No: _____

Under penalty of perjury, I certify that:

- The information herein is to the best of my knowledge and belief to be true and correct.
- I am not a citizen or resident for tax purposes of any country other than those listed in this section.
- I will notify Jannou Credit Union within 90 days of any change to the information stated in this section.

- I agree that Jannou Credit Union can provide to the United States Internal Revenue Service (U.S.IRS) and to any relevant tax authority (or any party authorized to act on behalf of such authority) any of the information provided in this section or any information that may be required to be provided by law to the U.S. IRS or other relevant tax authority relating to my account(s) with Jannou Credit Union.

FATCA/CRS DECLARATION- I

- a) Are you a US citizen, resident or green card holder? Yes No
- b) Do you have a standing order to transfer funds to an account maintained in the USA? Yes No
- c) Do you currently have effective power of attorney or signatory authority granted to a person with a US address? Yes No
- d) Did you obtain residence rights under a CIP/RBI Programme ? Yes No
If yes to 4(d), please respond to 4(e)
- e) Do you hold residence rights in any other jurisdiction(s)? Yes No
- f) Have you spent more than 90 days in any other jurisdiction(s) during the previous year? Yes No
- g) Did you file personal income tax returns in any country other than St Lucia during the previous year ? Yes No

DECLARATION - II

- a) That by signing below the Applicant is making an application to a) open the account and b) obtain certain credit union services subject to the Credit Union’s Terms and Conditions.
- b) That all details stated in this application are true, accurate and complete.
- c) That the Applicant will immediately notify the Credit Union as of all changes in any details provided herein.
- d) That the Account will not be used for fraudulent activity, money laundering or any criminal offence whatsoever.
- e) That all supporting documentation for all transactions to and from the Account shall be provided to the Credit Union immediately upon request.
- f) That the Applicant has received, thoroughly examined and agreed to be bound by the Credit Union’s Terms and Conditions and Credit Union fees and charges as amended from time to time and understands that the Individual application along with the Credit Union’s Terms and Conditions constitute a legally binding agreement between the Applicant and the Credit Union.
- g) That the Applicant agrees that the Credit Union can disclose Account information to relevant authorities under the appropriate legislation.
- h) That the Applicant agrees to the processing by the Credit Union of the information/data concerning the application in accordance with applicable laws.
- i) That the Applicant agrees that the Credit Union may at any time and without notice to the applicant combine and consolidate all and any accounts with the credit union in the individual’s name or to whom the individual is beneficially entitled and or set off any money whatsoever regardless of the type of account with which the funds are held.
- j) That the Applicant agrees to provide the Credit Union on request such information regarding its affairs as the Credit Union may require from time to time and authorizes the Credit Union to contact such persons as the Credit Union thinks fit to verify the correctness and completeness of any information furnished by the Applicant and authorizes such persons to release such information to the Credit Union.
- k) That the Applicant complies with all laws and regulations imposed on it by any applicable jurisdiction in respect to this application for an account opening and other credit union services.
- l) That the rights and obligations of the Applicant and the Credit Union hereto shall be governed by and interpreted in accordance with the laws of Saint Lucia and the courts of Saint Lucia shall have exclusive jurisdiction.

Signature of Applicant _____ Date _____

FOR OFFICIAL USE ONLY

APPLICANT RISK RATING: _____

COMPLIANCE REVIEW Yes No **DATE:** _____

BOARD APPROVAL Yes No **DATE:** _____

Comments: _____

MANAGER’S SIGNATURE: _____ **DATE:** _____

BOARD SECRETARY SIGNATURE: _____ **DATE:** _____

PAYMENT INFORMATION: -

Entrance Fee : _____
Deposit : _____
Ordinary Shares: _____
Regular Shares: _____
TOTAL _____

Transaction No: _____

MS Rep Signature : _____
and stamp

Date _____

Reviewed by: _____
Sign and stamp

Date _____

DOCUMENTS ATTACHED *(Please tick all that apply)*

(√)	DOCUMENT NAME
	Salary Slip/ Job Letter
	Birth Certificate (s)
	Proof of Address
	Copies of ID's
	PEP Form
	W9
	Self Certification Form
	Beneficiary Form