

Junior Saver Application Form

Please complete in BLOCK CAPITALS

1 Junior Details

First name(s) Middle name(s) Last name

Address Postcode

Date of birth Name of school (required if joining through a school)

2 Parent/Guardian Details

Title First name(s) Middle name(s) Last name

Telephone Email

Address Postcode

Date of birth Relationship to junior

Are you an existing Member? Yes No Membership Number (if applicable)

How did you hear about us?

3 Privacy Information

Kingdom Credit Union Ltd (trading as Kingdom Community Bank) is the controller of your personal data which we will use in order to open, administer and run your account. You hereby consent to accessing, processing, and retaining any information you provide to us, for the purposes of providing services to you and to comply with our

legal regulatory obligations. Your personal details are always treated confidentially, stored securely and will only be shared for purposes of identity and fraud checks with reference and/or identity checking agencies.

Kingdom Community Bank will never sell your personal data to any

organisation or person. We will not share your personal data with any other organisation or person outwith Kingdom Community Bank, except for the purposes of providing our services to you, as clearly set out in our Privacy Notice. You should read the Privacy Notice before completing this form.

continued overleaf

4 Declaration

By submitting this form for a Junior Saver account, you are agreeing to us using your personal data in the ways explained in the Privacy Notice. You may withdraw your consent to the use of this data by closing your account. For further information about how we will use your personal data, please view our full Privacy Notice at www.kingdomcb.org.uk/privacy

Copies can also be requested by e-mailing info@kingdomcb.org.uk or by telephoning 01592 714888. Paper copies are available in our offices.

I hereby declare that I am the parent or legal guardian of the child named on this form. I agree to act as trustee of this account until the junior saver reaches 18 years of age. I understand at this age that they will become responsible for their own account.

Signed

X

Date signed

dd/mm/yyyy

5 Submitting the Form and ID



by post

Kingdom Community Bank, Main Street, Methilhill KY8 2DP
Please include copies of acceptable proofs of ID*



by e-mail

info@kingdomcb.org.uk
Please attach scanned copies of acceptable proofs of ID*



in person

Main Street, Methilhill KY8 2DP or
15 Lyon Way, Kingdom Shopping Centre, Glenrothes KY7 5NN or
at our collection points.
Please bring acceptable proofs of ID* with you

Thank you

***ACCEPTABLE JUNIOR PROOFS OF (one of each is required)**



PERSONAL ID

Birth Certificate
Valid passport



ADDRESS VERIFICATION

Copy of NHS card
Letter from Fife Council / NHS / school
Copy of child benefit letter

If the parent or guardian is not an existing member of Kingdom Community Bank please provide:

***ACCEPTABLE PARENT/GUARDIAN PROOFS OF (two separate proofs are required, including one Photo ID if held)**



PHOTO ID

Valid passport
Full driving licence
EU National ID Card
HM Forces Card



ADDRESS VERIFICATION

Paper driving licence
DWP letter
Bank/Post Office/Credit statement†
HMRC letter
Utility bill†
Council tax letter
Letter from Fife Council or NHS
Tenancy agreement or rent card
Mortgage statement
Current TV Licence

†documents must be less than 3 months old

FOR OFFICE USE ONLY

Type of ID provided

Checked by

Date

Membership number

www.kingdomcb.org.uk

Kingdom Community Bank is a trading name of Kingdom Credit Union Ltd.

Kingdom Credit Union - Authorised by the Prudential Regulation Authority (PRA) and Regulated by the Financial Conduct Authority (FCA) and Prudential Regulation Authority (PRA), Registration No. 231896. Covered by the Financial Services Compensation Scheme (FSCS).