

ACCOUNT No.:

GENERAL INFORMATION FORM

PERSONAL INFORMATION			
<input type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> MS.			
FIRST NAME:	MIDDLE NAME:	LAST NAME:	
DATE OF BIRTH ((dd/mm/yyyy)):		NATIONALITY:	
CURRENT ADDRESS:			
PREVIOUS ADDRESS:			
TELEPHONE NOs.: Home:		Work:	Ext.: Mobile:
EMAIL ADDRESS:			

IDENTIFICATION <i>(valid photo ID required, include expiry date where appropriate)</i>		
BARBADOS ID CARD No.:	Issue Date (dd/mm/yyyy):	Expires:
PASSPORT No.:	Issue Date (dd/mm/yyyy):	Expires:
DRIVERS LICENCE No.:	Issue Date (dd/mm/yyyy):	Expires:
OTHER (Birth Certificate):	Issue Date (dd/mm/yyyy):	Expires:

EMPLOYMENT	
OCCUPATION:	EMPLOYER:
WORK ADDRESS:	
PAY CYCLE: <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Semi Monthly	SALARY/WAGES:
EMPLOYMENT STATUS: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Self-Employed <input type="checkbox"/> Casual <input type="checkbox"/> Seasonal <input type="checkbox"/> Un-Employed <input type="checkbox"/> Student <input type="checkbox"/> Retired	

ADDITIONAL INFORMATION	
Source of funds (Salary, Business, etc):	
Average Deposit:	Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly <input type="checkbox"/> Daily
Signature of member:..... Date: dd...../mm...../yyyy.....	

OFFICIAL USE ONLY	
..... Signature of Credit Union Employee Date
..... Updated By Date Updated