

1 Member Account Number: \_\_\_\_\_

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

2 Total Amount of Direct Debit: €

3 Please complete how you wish your direct debit to be disbursed:

€

Loan 1

€

Loan 2

€

Loan 3

€

Loan 4

4 Please select the frequency you wish your direct debit to be requested from your bank:

Weekly

Fortnightly

Monthly

5 Date of the month you wish us to collect funds from your bank:

If you wish to split your amended direct debit between your account and a family members account please complete the next section

6 Your LCU Family Member Number:

7 Total Amount to Family A/C: €

8 Please complete how you wish to disburse your Family members payment

€

Loan 1

€

Loan 2

€

Loan 3

€

Loan 4

€

Loan 5

9 Date: \_\_\_\_\_

10 Member Signature: \_\_\_\_\_

If you are amending a direct debit for your own account please complete parts 1,2,3,4,5,9 & 10

If you are amending your direct debit and wish to pay a family members account also please complete all sections

### OFFICE USE ONLY

Direct Debit Number: \_\_\_\_\_

Authorised CU Officer: \_\_\_\_\_

Actioned By: \_\_\_\_\_

Date: \_\_\_\_\_ Checked By: \_\_\_\_\_

At Life Credit Union, we are a data controller and as such, we respect and protect the privacy of our members, the data subjects. Please see our Privacy Notice for information on the personal data we collect, process, store and share.

