

## NEW MEMBER APPLICATION - MINOR SAVINGS AND CURRENT ACCOUNT

**TO JOIN, SIMPLY CALL IN PERSON, TO ONE OF OUR OFFICES WITH THE FOLLOWING ORIGINAL DOCUMENTS:**

- Child's Photo ID:** (valid passport or birth certificate if the child doesn't have a passport)
- Child's Proof of PPS Number:** (letter from official source, medical card, E111 card, etc.)
- Tax Resident in Another Country:** provide Tax Identification Number (TIN) and Country of Tax Residence
- Children over the age of 7,** must be present at account opening stage

**Parents/Guardians opening the account must provide their own**

- Photo ID:** (valid passport or driver's license)
- Proof of Address:** (bank statement or utility bill in your name - issued within the last 6 months)
- Fathers opening accounts** for their children will require child's birth certificate (Stating their name as father) or other legal document to prove Guardianship
- Mothers opening account** for their children will require child's birth cert if mother's surname differs from child's

New account     Reactivate existing account (tick as appropriate)

Please complete in **BLOCK CAPITALS** and bring to any of our branches with your original identification documents

Title (Mr., Mrs, Miss etc)		Existing Life CU Account Number	
First Name		Surname	
Date of Birth		Gender	
Telephone - Mobile		Telephone – Landline	
Nationality		Country of Birth	
Address			
Eircode		Years at this address	
Previous Address (if less than 5 years at above)			
Email Address (Block Capitals)			
Source of Wealth (e.g., salary/wages, inheritance, accumulated savings)		Source of funds (e.g., salary/wages, pension, rent)	

**Have you been a member of any other credit union? If so, please list:**

**The reason we are opening an account is to avail of current and future services of Life credit union such as Savings, Loans, Overdraft & ATM cards.**

A parent or guardian can withdraw independently from a minor account up until the age of 7, From the date of the minor's 7th birthday up until the date of the minor's 16th birthday the parent or guardian and the minor must both present to branch to sign for any withdrawal on a minors account.

I hereby apply for membership of and agree to abide by the rules of the above credit union.

I confirm that I have received the "Deposit Guarantee Scheme - Depositor Information Sheet"

Applicant's Signature: \_\_\_\_\_

Applicant's Name Printed: \_\_\_\_\_

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

**Where an Applicant, through age or incapacity, is unable to sign:**

I/we hereby apply for membership for \_\_\_\_\_ and acknowledge that all shares/deposits arising from this membership now and hereafter shall be his/her sole property, and that all withdrawals shall be applied to his/her sole benefit.

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature Verified by: \_\_\_\_\_  
 Office Use Only    Date: \_\_\_\_\_



## SUPPLEMENTARY MEMBERSHIP APPLICATION INFORMATION

All Credit Unions are obliged to comply with the legislation that Government has enacted to combat money laundering and the financing of terrorism. This legislation is called the 'Criminal Justice (Money Laundering and Terrorist Financing) Acts 2010 and the Criminal Justice Act 2013.

In accordance with this legislation, we are required to obtain answers from all our members to the following questions. We should be grateful if you would tick the relevant boxes on this form. The explanation of the terminology used is given at the back of the form.

### Please Tick the relevant box to answer the following questions:

1. Are you a Politically Exposed Person (PEP) as defined in Section 37 (10) of the Criminal Justice (Money Laundering and Terrorist Financing) Act 2010

Yes  No

If the Answer is 'Yes', please complete PEP additional form.

Note: A politically exposed person is an individual, or an immediate family member, or a close associate of an individual who resides outside of the Republic of Ireland and has held a prominent public function at any time in the preceding 12 months.

2. Are you the beneficial owner of the funds in your shares/deposit account?

Yes  No

If the Answer is 'No', please explain why here:

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I will promptly notify the Credit Union of any changes in the information which I have provided and confirm that I will inform the Credit Union in writing of the details of such changes and any other relevant/material information of which I may become aware of at any time after the date of this declaration.

**Applicant's Signature** \_\_\_\_\_

**Printed Name** \_\_\_\_\_

**Date** \_\_\_\_\_

### Acknowledgement of use and disclosure of my personal data in line with the data protection Acts, 1988 and 2003, the General Data Protection Regulation (GDPR) and Section 71 of the Credit union Act, 1997.

I understand that the personal data collected in this form will be processed for the purpose of administering my account in Life Credit Union. I note that the data disclosed may include personal data and special category data within the meaning of the GDPR. I also understand that under Section 71 of the Credit Union Act, 1997, the Credit Union, subject to exceptions listed in the Section, shall not disclose, or permit to be disclosed, without my consent, any information that concerns an account or transaction of mine with the Credit Union.

For the purpose of assessing my application for membership and generally for administering and monitoring any accounts I have with the Credit Union: I acknowledge that:

- (i) the Credit Union may disclose any information in my application or in respect of any account or transaction of mine with the credit union to authorised officers or employees of the Irish League of Credit Unions (ILCU) for the purpose of fulfilling requirements under the Savings Protection Scheme if such a scheme is operated on behalf of the credit union by the Irish League of Credit Unions; and
- (ii) the Credit Union will process any information relating to me, either contained in this form or any other form or application, for the purpose of assessing this application, and administering any accounts I maintain with the credit union.

The information given by me on this form is true and correct to the best of my knowledge and belief. I understand that any false or misleading information given by me in connection with my application for or my membership with the credit union may result in termination of my membership, apart from any other legal sanctions that may apply.

Please note that you have the right to access personal data held about you by the credit union and to correct any inaccuracies in such data.

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.

**Applicant's Signature** \_\_\_\_\_

**Parent/Guardians Signature** \_\_\_\_\_



## ACCOUNT USAGE

What will this account be used for?	
Where will the money be coming from to fund this account?	
How often will you be lodging to this account?	
What is your estimated monthly lodgement?	
What % will be in cash?	
Will your income be mandated? If so, how much?	
Will this be your main current account for everyday banking?	
Statement Preference: *Y = E-Statement N = Postal Statement	

## ANTI-MONEY LAUNDERING, TERRORISM, FATCA, CR LEGISLATION

	Applicant 1	Applicant 2
How have you accumulated your overall wealth?		
Do you intend making any external lump sum lodgements to this account in the next 12 months?		
If yes, please indicate how much the lump sum lodgements would be?		
What is the source of these funds?		
Do you intend to transact with any countries outside of the following areas: EU, Liechtenstein, Iceland, Norway, North America, or Australia/New Zealand?		
Are you a US Citizen?		

## DECLARATIONS AND CONSENTS

I / We hereby apply for a Current Account in my / our names.  
 I / We acknowledge that I / We have read and accept the Current Account and Debit Card Terms & Conditions (incorporating Distance Marketing Information for Current Accounts) and the Current Account Schedule of Fees & Charges copies of which are available from the Credit Union website and offices.  
 I / We acknowledge that I / We have read the Deposit Guarantee Scheme – Depositor Information Sheet.  
 I / We confirm that the information provided by me / us on this form is complete and correct to the best of my / our knowledge and belief, and that if circumstances change, I / we will notify the Credit Union

**Applicant's Signature:**

**Print Name:**

**Date:**

## PRIVACY NOTICE

The details provided in this application form, together with any other information that is furnished to us in connection with this application will be retained and processed by Life Credit Union in accordance with the Privacy Notice which is available on our website at <https://www.lifecu.ie/> and in any of our offices.

## DEBIT CARD APPLICATION

PERSONAL INFORMATION	
<b>Members Number:</b>	
<b>Current Account No:</b>	
DECLARATION & CONSENTS	
I / We hereby apply for a Mastercard® Debit Card in my / our names.	
I / We acknowledge that I / We have read and accept the Current Account and Debit Card Terms & Conditions (incorporating Distance Marketing Information for Current Accounts) and the Current Account Schedule of Fees & Charges copies of which are available from the Credit Union website and offices.	
I / We confirm that the information provided by me / us on this form is complete and correct to the best of my / our knowledge and belief, and that if circumstances change, I / we will notify the Credit Union.	
Debit Card Required (Tick Box) <input type="checkbox"/>	
Applicant Signature: _____	Date: _____
Your Debit Card and Personal Identification Number (PIN) will be forwarded separately within 10 business days of approval. Mastercard is a registered trademark, and the circles design is a trademark of Mastercard International Incorporated. The Debit Card is issued by Transact Payments Limited pursuant to licence by Mastercard International. Transact Payments Limited is authorised and regulated by the Gibraltar Financial Services Commission.	

**Application approved and details verified in accordance with the standard rules by:**

**Signed:** .....  
**(Credit Union Staff Member Signature)**

**Date:** .....





**Data Protection Notice** For information in relation to how we collect personal information about you and your child as account holder, and how we use it, see our Data Protection Notice in our office(s) and on our website [www.Lifecu.ie](http://www.Lifecu.ie).

The Debit Card is issued by Transact Payments Malta Limited pursuant to a licence by Mastercard International. Transact Payments Malta Limited is authorised and regulated by the Malta Financial Services Authority as an Electronic Money Institution. Mastercard is a registered trademark, and the circle design is a trademark of Mastercard International Incorporated.

**Please provide the following information**

Parent/Guardian:      Name   
    Address   
      
   

Membership No

**Parents/Guardians opening the account must provide their own**

- **Photo ID:** (valid passport or driver’s license)
- **Proof of Address:** (bank statement or utility bill in your name - issued within the last 6 months)
- **Fathers opening accounts** for their children will require child’s birth certificate (stating their name as father) or other legal document to prove Guardianship
- **Mother’s opening account** for their children will require child’s birth cert if mother’s surname differs from child’s

**Privacy Notice**

The details provided in this form, together with any other information that is furnished to us in connection with this consent will be retained and processed by Life Credit Union in accordance with the Privacy Notice which is available on our website at [www.Lifecu.ie](http://www.Lifecu.ie) and in any of our offices.

The Credit Union is authorised, in respect of any information and/or copy documents supplied to enable them to comply with its obligations to establish the identity of the parties in accordance with the laws and regulations concerning the prevention of money laundering and terrorist financing.

Signature  Parent/Guardian

Date  /  /



## EXPLANATION OF TERMS USED OVERLEAF

Life Credit Union are required to take steps to determine whether or not a member, or a beneficial owner connected with the member or service concerned, being a member or beneficial owner, residing in a place outside of the State, is a politically exposed person or an immediate family member, or a close associate of, a politically exposed person.

### Politically Exposed Person' (PEP)

'Politically exposed person' means an individual who is, or has at any time in the preceding 12 months been, entrusted with a prominent public function, including either of the following individuals (but not including any middle ranking or more junior official):

- (a) a specified official.
- (b) a member of the administrative, management or supervisory body of a state-owned enterprise.

'Specified Official' means any of the following officials (including any such officials in an institution of the European Communities or an international body):

- (a) a head of state, head of government, government minister or deputy or assistant government minister.
- (b) a member of parliament or of a similar legislative body.
- (c) members of the governing bodies of political parties.
- (d) a member of a supreme court, constitutional court, or other high level judicial body whose decisions, other than in exceptional circumstances, are not subject to further appeal.
- (e) a member of a court of auditors or of a board of a central bank.
- (f) an ambassador, chargé d'affaires or high-ranking officer in the armed forces.
- (g) directors, deputy directors and members of the board or equivalent function of an international organisation.

### Close Associate

In this section 'close associate' of a politically exposed person includes any of the following persons:

- a) Any individual who has joint beneficial ownership of a legal entity or legal arrangement, or any other close business relations, with the politically exposed person.
- b) Any individual who has sole beneficial ownership of a legal entity or legal arrangement set up for the actual benefit of the politically exposed person.

### Immediate Family Member

'Immediate Family Member' of a politically exposed person includes any of the following persons:

- a) Any spouse of the politically exposed person.
- b) Any person who is considered to be equivalent to a spouse of the politically exposed person under the national or other law of the place where the person or politically exposed person resides.
- c) Any child of the politically exposed person.
- d) Any spouse of a child of the politically exposed person.
- e) Any person considered to be equivalent to a spouse of a child of the politically exposed person under the national or other law of the place where the person or child resides.
- f) Any parent of the politically exposed person.
- g) Any other family member of the politically exposed person who is of a prescribed class.

'The Minister may prescribe a class of family member of a politically exposed person, for the purposes of paragraph (g) of the definition of "immediate family member" of a politically exposed person in subsection (10), only if the minister is satisfied that it would be appropriate for the provisions of this section to be applied in relation to members of the class, having regard to any heightened risk, arising from their close family relationship with the politically exposed person, that such members may be involved in money laundering or terrorist financing'.

## Basic information about the protection of your eligible deposits

Eligible deposits in LIFE CREDIT UNION LTD are protected by:	the Deposit Guarantee Scheme (“DGS”)(1)
Limit of protection:	EUR 100,000 per depositor per credit institution(2)
If you have more eligible deposits at the same credit institution:	All your eligible deposits at the same credit institution are ‘aggregated’ and the total is subject to the limit of EUR 1 00,000(2)
If you have a joint account with another person(s):	The limit of EUR 100,000 applies to each depositor separately(3)
Reimbursement period in case of credit institution’s failure:	10 working days( 4)
Currency of reimbursement:	Euro or, for branches of Irish banks operating in other EEA Member States, the currency of that State.
To contact LIFE CREDIT UNION Ltd for enquiries relating to your account:	LIFE CREDIT UNION 20 North Main Street Naas Co. Kildare Tel: 045-879622
To contact the DGS for further information on compensation:	Deposit Guarantee Scheme Central Bank of Ireland New Wapping Street, North Wall Quay, Dublin 1  Tel: 1890-777777 Email: info@depositguarantee.ie
More information:	<a href="http://www.depositguarantee.ie">www.depositguarantee.ie</a>



## (1) Scheme responsible for the protection of your deposit

Your deposit is covered by a statutory deposit guarantee scheme. If insolvency should occur, your eligible deposits would be repaid up to €100,000.

## (2) General limit of protection

If a covered deposit is unavailable because a credit institution is unable to meet its financial obligations, depositors are repaid by the DGS. This repayment covers at maximum €100,000 per person per credit institution. This means that all eligible deposits at the same credit institution are added up in order to determine the coverage level. If, for instance, a depositor holds a savings account with €90,000 and a current account with €20,000, he or she will only be repaid €100,000.

## (3) Limit of protection for joint accounts

In case of joint accounts, the limit of €100,000 applies to each depositor. However, eligible deposits in an account to which two or more persons are entitled as members of a business partnership, association or grouping of a similar nature, without legal personality, are aggregated and treated as if made by a single depositor for the purpose of calculating the limit of €100,000.

In some cases, eligible deposits which are categorised as “temporary high balances” are protected above €100,000 for six months after the amount has been credited or from the moment when such eligible deposits become legally transferable. These are eligible deposits relating to certain events which include:

- a) certain transactions relating to the purchase, sale, or equity release by the depositor in relation to a private residential property.
- b) sums paid to the depositor in respect of insurance benefits, personal injuries, disability and incapacity benefits, wrongful conviction, unfair dismissal, redundancy, and retirement benefits.
- c) the depositor's marriage, judicial separation, dissolution of civil partnership, and divorce.
- d) sums paid to the depositor in respect of benefits payable on death; claims for compensation in respect of a person's death or a legacy or distribution from the estate of a deceased person.

More information can be obtained at [www.depositguarantee.ie](http://www.depositguarantee.ie)

## (4) Reimbursement

The responsible deposit guarantee scheme is:

Deposit Guarantee Scheme, Central Bank of Ireland, New Wapping Street, North Wall Quay, Dublin 1.  
Tel: 1890-777777. Email: [info@depositguarantee.ie](mailto:info@depositguarantee.ie). Website: [www.depositguarantee.ie](http://www.depositguarantee.ie).

It will repay your eligible deposits (up to €100,000) within 10 working days from 1 January 2021 to 31 December 2023; and within 7 days from 1 January 2024 onwards, save where specific exceptions apply.

Where the repayable amount cannot be made available within seven working days depositors will be given access to an appropriate amount of their covered deposits to cover the cost of living within five working days of a request. Access to the appropriate amount will only be made on the basis of data provided by the credit institution. If you have not been repaid within these deadlines, you should contact the deposit guarantee scheme.

## Other important information

In general, all retail depositors and businesses are covered by the Deposit Guarantee Scheme. Exceptions for certain deposits are stated on the website of the Deposit Guarantee Scheme. Your credit institution will also inform you on request whether certain products are covered or not. If deposits are eligible, the credit institution shall also confirm this on the statement of account.