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2020: \

Health Services Staffs Credit Union

CHRISTMAS SAVINGS ACCOUNT APPLICATION (DEPOSIT A/C)

(Please complete all sections in BLOCK CAPITALS)

Account Number:		Member Address:
Member Name:		
Date:		PPSN:
Collection of this number is f	for the purpose of complying with r	eporting obligations to the Revenue Commissioners.
I confirm that the payout of r	my funds are to be forwarded to me	ə by E.F.T
Please note if you change a your Christmas Savings Acc		t inform the credit union in writing specifying that you require
Bank Details (for Christmas S	avings Account only)	
Sort Code:		Account Number:
	the rules and wish to open a deposi	
Member Signature:		Date:
to DIRT. The Gross Interesseparate transaction.Funds in this account can leach year. On that date all	count is variable. Interest is credited est will be paid to members' deposi be withdrawn at any time, but we end I funds held in this account will be for	nformation d on a monthly basis. Interest paid on deposit accounts is subject t account(s) and DIRT will be deducted on the same date as a courage members not to do so until the "Payout date" in November warded to the member by E.F.T the "Payout date" and you can continue to save for the
Office Use Only Application form signed		
Payment Method Deduction slip signed and	new breakdown listed	
Direct Debit Mandate or D	DD change form and change in brea	kdown form
Child benefit form comple	ted	
Checked and sent to input	utting by:	Date:
Account Opened by:		Date:
Compatible with Acrobat Reader Free Download		No.
		Christchurch, Dublin 8, D08 X7T1. 677864 email: info@hsscu.ie
/ersion 1.	Health Services Staffs Credit Union Limited	is regulated by the Central Bank of Ireland
	Branches listed on W	ww.hsscu.ie