



**BANK EMPLOYEES' CREDIT UNION CO-OPERATIVE SOCIETY LIMITED**  
 Cor. Bourne Road and Angelina Street, P. O. Box 4660, St. James  
 ☎ 622-9634/622-4035/628-4884 FAX: 628-2559  
 E-Mail: [service@becuonline.com](mailto:service@becuonline.com) Website: [www.becuonline.com](http://www.becuonline.com)

**YOUTH MEMBERSHIP APPLICATION FORM**

Membership #
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I ..... am the ..... of ..... (Membership #.....) who is a bona fide member of the Bank **Employees Credit Union Co-operative Society Limited**.

**BOND OF MEMBERSHIP**

Bye-laws, Article 4, Membership shall be open to:

All persons of good character aged 16 years and over who are:

- a. Employees of Financial Institutions (Banks, Insurance Companies, Mortgage Finance Companies, etc.
- b. Permanent employees of the Society and the Banking Insurance and General Workers Union
- c. Immediate family of persons who are already Members, including spouse (common-law relationships included) parents, children (adopted children included), brother and sister
- d. Members of other registered Co-operative Societies in Trinidad and Tobago
- e. Persons who were already members and who for whatever reason leave their place of employ. In such cases the membership would continue unbroken except where the board dictates otherwise.
- f. Employed persons residing or working within a fifteen kilometers (15 Km) radius of the operations of the office of BECU

**MEMBERSHIP QUALIFICATION**

You are **required** to submit the following documents in support of your application: Birth Paper /Two forms of picture ID and proof of address; For (d.) membership in another credit union, member statement is required.

**PERSONAL DATA**

**(APPLICANT'S PERSONAL DATA)**

Name	Date Of Birth	Tel. #	Home Address
		..... (H) ..... (C)	
<b>Personal Email Address:</b>	<b>Identification # (State if DP, Passport , National ID or Birth Certificate):</b>		<b>Gender:</b>
			M <input type="checkbox"/> F <input type="checkbox"/>
<b>Country of birth</b>		<b>Nationality</b>	

**RECOMMENDER'S/SPONSOR'S PERSONAL DATA**

<b>Name</b>	<b>Employer's Name</b>	<b>Employer's Address</b>	
<b>Employer's Tel. #</b>	<b>Occupation</b>	<b>How Long Employed</b>	

**SOURCE OF FUNDS DECLARATION**

I DECLARE THE SOURCE OF FUNDS FOR THIS ACCOUNT IS :-

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**EMPLOYMENT DATA (PARENT or GUARDIAN)**

<b>Employer's Name</b>		<b>Employer's Address</b>		
<b>Employer's Tel. #</b>	<b>Occupation</b>		<b>How Long Employed</b>	
<b>Employment Status</b>	Permanent [ ]	Contract [ ]	Self Employed [ ]	Part Time [ ]

**Monthly Remuneration**

Under \$5,000            [ ]      \$5,001 - \$10,000      [ ]      \$10,001 - \$15,000      [ ]  
 \$15,001 - \$20,000    [ ]      \$20,001 - \$30,000    [ ]      \$30,001 - \$40,000    [ ]      \$40,001 - \$50,000    [ ]  
 Over \$50,000           [ ]

I enclose the sum of \$ ..... to cover the following:

*Entrance Fee* ..... \$.....  
*Shares* ..... \$.....  
*Deposits* ..... \$.....  
*Other (specify)* ..... \$.....

**TOTAL \$ \_\_\_\_\_**

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**APPLICANT'S SIGNATURE:** .....  
 (Parent's Signature if child is under 10 years of age)

**DATE:** .....

## PARENT/GUARDIAN'S DECLARATION

I, .....do hereby consent to the application made by my.....for Membership in the **Bank Employees Credit Union Co-operative Society Limited** and agree to abide by the rules of the Society in this regard.

PARENT'/ GUARDIAN'S SIGNATURE:.....

DATE: .....

WITNESSED BY: .....SIGNATURE:.....

DATE: .....

## POLITICALLY EXPOSED PERSONS DECLARATION

**ARE YOU A POLITICALLY EXPOSED PERSON (check ALL that apply):**

1.  **YES**  **NO** A current or former senior official in the executive, legislative, administrative or judicial branch of domestic or a foreign government, whether elected or not
2.  **YES**  **NO** A senior official of a major political party
3.  **YES**  **NO** A senior executive of a **domestic** or foreign government-owned commercial enterprise
4.  **YES**  **NO** A senior military official
5.  **YES**  **NO** An immediate family member of a person above (spouse, parents, siblings or children) or the parents, siblings and additional children of the person's spouse.
6.  **YES**  **NO** A close personal or professional associate of the persons mentioned above.
7.  **YES**  **NO** Any individual who is or have been entrusted with a prominent function by an international organization such as the UN and affiliates, OAS, IDB, ILO, CFATF, etc.

**If Yes, to any of the above please provide details of relationship and complete statement of affairs below:**

### STATEMENT OF AFFAIRS

CURRENT ASSEST		CURRENT LIABILITIES	
Cash on Hand/Bank		Loans =>5yrs	
Stocks Bonds etc		Short term Loans	
Real Estate (Market Value)		Mortgage Loan	
Motor Vehicle/s (Market Value)		Credit Cards	
Household (Furniture/Fixtures, computer etc)		Hire Purchase	
Other Assets (Life Ins, etc)		Other	
<b>Total Assets</b>		<b>Total Liabilities</b>	
<p><b>NETWORTH=</b></p> <p style="text-align: center;"><b>NET WORTH = (Total Assets - Total Liabilities)</b></p> <p><b>DEFICIT=</b></p> <p style="text-align: center;"><b>DEFICIT = (Total Liabilities - Total Assets)</b></p>			

**FOR OFFICIAL USE ONLY**

This application for Membership in the Bank Employees Credit Union Co-operative Society Limited made by

..... (applicant) is hereby approved.

**Membership #:** .....

**Date Approved:** .....

**Secretary** .....

**President** .....

**Recommender's Membership #:** .....

Data Entry
Date Entered: .....
By: .....
Reviewed By: .....

**\*Standing Order Received:** YES [ ] NO [ ]

**Date Documents Dispatched:** .....

**MEMBERSHIP CDD (Customer Due Diligence) CONFIRMATION**

Referenced against UN Lists (1267/2253/1988 )	Match: YES [ ]	NO [ ]
Referenced against other list (CFATF/ FATF)	YES [ ]	NO [ ]
Proof of Address:- Utility Bill, Correspondence from Registered FI- not more than 6 months old; Voter Registration Card or Tax Assessment	YES [ ]	NO [ ]
Two Forms of photo ID / BIRTH PAPER	YES [ ]	NO [ ]

**Authorized by:** .....

*\*Standing order should include a minimum monthly contribution of \$50.00 towards share deposit.*