



STEP-BY-STEP Minor's Application Form

For Office use only:
Account No.:

(For applicants under the age of 15)

Minor's Information	
First Name:	Middle: Last:
Date of Birth (DD/MM/YY):	Gender:
Home Address:	Postal Address:
School:	Grade/ Form:
Email Address:	Contact Number(s):

Parent/Guardian Information	
Name: First	Middle Last
Relationship	Date of Birth:
Home Address:	Postal Address:
Email Address:	Contact Number(s):

*Originator Information	
Name: First	Middle: Last:
Relationship:	Date of Birth:
Home Address:	Postal Address:
Email Address:	Contact Number(s):

***The individual who opens the account on behalf of the minor.**



**NATIONAL FARMERS AND GENERAL WORKERS
CO-OPERATIVE CREDIT UNION SOCIETY LTD**

Beneficiary Information				
Name	Address	Relationship	Telephone	Portion Shared

I/We understand that no withdrawals can be made from this account until the account holder reaches the age of 16 years. Any amendments to be made on the account must be done with the consent of the Originator (the individual who opened the account on behalf of the minor). In the event of an emergency **only one withdrawal per year** will be authorized on this account. If more than one withdrawal is required then the account will be transferred into a deposit account which bears no interest.

Signatures	
Signature of Minor	Date (DD/MM/YY)
Signature of Parent	Date (DD/MM/YY)
Signature of Originator (Required)*	Date (DD/MM/YY)
Signature of Witness 1 (Required)*	Date (DD/MM/YY)
Signature of Witness 2 (Required)*	Date (DD/MM/YY)