

ACU Closure of Account Form

Adventist Credit Union LTD
 c/o Hyland House School
 Holcombe Road
 Tottenham
 London N17 9AD
 Mobile: 07930 854730
 Website: www.adventistcreditunion.co.uk
 Email: info@adventistcreditunion.co.uk



SECTION A - APPLICANT'S DETAILS	
Title: Mr/Mrs/Miss/Ms	Surname:
First Name:	Middle Name:
Present Address:	
Home Tel:	Mobile:
Email:	

SECTION B – MEMBERSHIP TERMINATION ONLY
Book No _____ I hereby relinquish my membership of the Adventist Credit Union Ltd and request a withdrawal of that proportion of my share balance which does not exceed any loan balance owed by me to the Credit Union at the date this registration is effected. I understand that my membership will not be terminated until all my loan liabilities to the Credit Union are discharged in full, and agree until then to maintain my regular monthly loan repayments.

SECTION C – PAYMENT METHOD
Please select one of the following options: <input type="checkbox"/> Cheque Payable to: <input type="checkbox"/> Cash (only available for withdrawals of £250 or less) <input type="checkbox"/> BACS (Give Bank Details) Sort Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Account No: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Signature of Applicant: _____ Date: _____

For Office Use Only	
Date Received: _____	Date Processed: _____
Shares: £ _____ p	Member to receive funds by:
Less _____ p	<input type="checkbox"/> BACS
Loan: £ _____ p	<input type="checkbox"/> Cheque Cheque No: _____
TOTAL £ _____ p	<input type="checkbox"/> Cash (max £250)
Received by: _____ (Signature)	Date: _____

