Bank Standing Order		Please write in capitals and use black ink only			
To the manager:					Bank
Bank address:					
Sort Code:		Account No.			
This mandate supersedes any previous standing orders in favour of Hull & East Yorkshire Credit Union					
Please pay on the	day of		20		
the sum of £					
and each week* / f thereafter until fur Hull and East Yorks Co-operative Bank Account number 6	ther notice to the shire Credit Unions sort code 08 - 9	ne credit of: on Limited	ete those	e that d	o not apply)
Quoting the reference	ce:				
Signed:					
Date:					
Name:					

Hull & East Yorkshire Credit Union Limited. Tel: 01482 778753

Contact Us

Address:

HEY Credit Union, 38 Brook Street, Hull, HU2 8LA info@hullandeycu.co.uk | 01482 778753

www.hullandeycu.co.uk



Hull & East Yorkshire Credit Union (HEY Credit Union) is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority - FRN 213620, registered number 591C. V2 November 2024.

Application Form

First Saver

An instant access savings account for anyone aged between 0 and 18. A great way to introduce young people to financial responsibilty.







First Saver Application Form

First Saver's Details

Full name:	
Date of birth:	Gender:
Home address:	
	Postcode:
Adult Signatory's details	
Full name:	
Home address:	
	Postcode:
Home telephone:	Mobile:
Email address:	
HEYCU Member number (if any):	
Relationship to First Saver:	
If you are not a member, how did you hea	r about us?
I (the Adult Signatory), am applying to (HEYCU) for the First Saver named about I agree to abide by the terms and con-	
Signed:	Date:
Withdrawals	
Register a bank account with us for pay sends to the First Saver named above.	yment of any funds that HEY Credit Union (HEYCL
Account holder:	
Sort Code:	Account No.

Savings

How would you like to save? Payroll Deduction / Standing Order / Cash

If you have selected *Payroll Deduction** or *Standing Order*, please complete the relevant form included on the following pages.

* For this option, the Adult Signatory must be a HEY Credit Union member with an employer who supports HEY Credit Union Payroll Deduction.

Payroll Deduction Order

Occupation:				
Employer's name:				
Payroll No.				
Frequency of pay: Weekly / Monthly / Other (please state):				
Employer's address:				
	Postcode:			
Employment start date:	Employer's telephone:			
Please deduct from my pay £ per week / month in favour of HEY Credit Union starting from the first available pay date, and continuing until I give written notice to the Credit Union of any change.				
Signed:	Date:			
For Office use: Member Number:				

