



City of Bridgetown Co-operative Credit Union Limited
MEMBER INFORMATION UPDATE FORM

Title Mr Mrs Ms Dr Member No _____

Surname _____ First Name _____ Middle Initial _____

Address _____

Postal Code _____

Telephone No _____ (H) _____ (W) _____ (C) _____

National Registration No _____ Passport No _____ Driver's License No _____

Other _____

Date of Birth _____ Place of Birth _____ Nationality _____

Dual Nationality Yes No Country(ies) of Citizenship _____

Email Address _____

Marital Status Single Married Divorced Separated Widowed

Number of Dependents _____

Name & Address of Employer _____

Job Status Permanent Temporary Part-time Contract

Occupation _____

What is your wage/salary? (\$) _____

Pay Mode Weekly Bi-monthly Monthly

If self-employed is your business registered? Yes No

What is the name of the business? _____

Describe the type of business _____

Are you a Resident/Citizen of the United States of America? Yes No

Signature of Member _____ Date _____ / _____ / _____
MM DD YY

FOR OVERSEAS MEMBERS ONLY

Notarial Certificate

I _____, Notary Public and for the Country /State/Province/County of _____, do hereby CERTIFY that on the day of the date hereof personally came to me a male/female who identified his/herself to be the within named _____ the executing party to the foregoing written documentation who did in my presence duly sign, seal and deliver the same as and for his/her free and voluntary act and deed. Given under my hand and seal this _____ day of _____ 20_____.

PLACE NOTARY STAMP HERE

Notary Public in and for the Country/State/Province/County of _____

FOR OFFICIAL USE ONLY

Name of staff member updating account (please print) _____

Signature of staff member updating account _____ Date / /
MM DD YY

Name of staff member verifying account (please print) _____

Signature of staff member verifying account _____ Date / /
MM DD YY