Boreenmanna Road, Cork, T12 TN67

021-4313355

enquiries@stpaulscu.ie

www.stpaulscu.ie



For Office Use
<b>ACCOUNT NUMBER</b>

# Application for Membership - Adult (16 or Over)

Please use Block Capitals & Read Explanatory notes before completing this form

1) Personal Information:							
Applicants Name:	Date of Birth:						
Home ————————————————————————————————————							
Gender: Male Female	Eircode:						
Marriage/ Civil Status:	PPSN:						
Previous Address if less than 5 years at above:							
Mobile Number:	Email:						
Other Tel:	Occupation:						
Employer:	Place of Employment:						
Garda Reg , Staff or Reserve No.							
Security Q Favourite Film:	Or First School:						
2) Family Members:  This Section to be completed by the Bond Holder of the applicant.  I certify that the applicant is a member of my family/household. *(Bond Holder is defined on www.stpaulscu.ie/membership)							
Bond Holder Name:	Account Number:						
Relationship of Applicant (e.g son, daughter in Law e.t.c)							
Bond Holder Signature:	Date: / /						
3) Are you a Politically Yes No No No	Family Member/Close Associate of a PEP?  No No						

) Tax Residei	icy for	the purp	oses of t	he com	mon r	eporti	ng stand	arc
Are ye	ou a tax res	sident in the R	epublic of Irela	ınd? Ye	s	No		
lf you are tax resident in	another cour	ntry, please prov	ide your Tax Iden	tification Numl	oer ("TIN") (	and Country	of Tax Residenc	e:
in*								
ner Country of Tax Residence 1*								
IN**								
ner Country of Tax Residence 2**								
* Mandatory Field if Tax	: Resident in a c	country outside R.C	D.I. ** Mandatory Fie	eld if also Tax Re	sident in a	second counti	ry outside R.O.I.	
) Methods o	f Paym	ent: Amo	ount €	Per We	ek	Fortnight	t Monti	h [
Deduction from Go	arda Pav*	Dedu	ıction from Ga	rda Pension		Dire	ct Debit**	7
	-							_
eby agree to have my contributioned organisation on my behalf. I als		-						
be changed from time to time by the State accepts no further resp	the above named	organisation. I recogni	ise that, beyond making	remittance to the o	rganisation co	oncerned equivale	ent to the amount ded	ucted,
								ie.
**Where payment is to be	•		a SEPA Direct Debt Mai					
5) Your Bank	Details	S: Bank Ad	count BIC:					
Bank Account IBA	٧:							
								7
								_
ng your Bank Account details will			Funds Transfer (EFT) dire f on St. Paul's Garda Cre	•		request an EFT b	y calling or emailing us	or, you
	carrao a							
7) Car & Casl	1 Draws	5:	sh to be includ		Ye	es 🗍	No 🗍	
		& C	ash Draws @ €	6.50/month				
NOTE:	Terms and Conditi	ions apply. Draw Rules	are available from our c	ffice or website. Mu	st be 18 years	of age or older.		
2) Consont to	1100 04	d proces	C VOISE DE	vaqua1	data			
3) Consent to	use an	ia proces	s your pe	rsonat	uata:			
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nd up to date with Car D		•	_					
ease Opt-in to the meth	nods vou con	sent to be cont	acted:					
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Car Draw results and	d other							
Marketing by email:	•	Opt-In	Opt-Out				ge your mind and	
					_	-	e to refuse and	
Marketing by Deet		Opt-In	Opt-Out	fur			king the opt-out and you or by writi	
Marketing by Post:		·	, , , , , ,		-	-	t. Paul's Garda C	_
		Ont-In	Ont-Out F				na Road, Cork, 1	
Marketing by Text:		Opt-In	Opt-Out				. ,	

## 9) Statements and Obligatory Notices:

It is St. Paul's policy to provide all Statements and notifications electronically to our members. You can of course contact us to request a paper copy of your statement anytime. This will be deemed as a request for a duplicate statement (fees may apply).

St. Paul's is required to send you Statements and Obligatory notifications. If you opt out of receiving these electronically, we will have to send them to you by post. Contact St. Paul's to switch to postal statements and notifications. Fees may apply.

10) Declaration						
acknowledge and accept St. Paul's GDPR Privacy Notice (available from our office and website)						
I consent to the processing of my personal data in the manners provided for in St. Paul's GDPR Privacy Notice						
I acknowledge and accept the EU (Payment Services) Regulation 2018, PSD2 (available from our office and website)						
I acknowledge and accept the Deposit Information Sheet (available from our office and website)						
I acknowledge receipt of the Terms & Conditions (available from our office and website)						
I hereby apply for membership of and agree to abide by the rules and Terms & Conditions of the Credit Uni The information given by me on this form is true and correct to the best of my knowledge and belief. I understand tha misleading information given by me in connection with my application form or my membership with the Credit Union termination of my membership, apart from any other legal sanctions that may apply.	at any false or					
What is the Source of Funding for the account? e.g. Salary, Investments etc.						
What is the purpose of the account? e.g. Savings, Loans, Budget, Current						
I confirm that the account is for my own personal use and benefit:  Yes  No  If no, enter name are beneficial owners.						
Applicants Signature:	<u> </u>					
Before you return your Application Form, check that all sections are completed. Complete the Checklist and en ALL relevant supporting documentation is included. Incomplete applications will be returned to you for corre						
For Office Use:  Application approved and details verified in accordance with the standard	ard rules by:					
Signed: (Membership Committee)						
Date: / /						

St Paul's Garda Credit Union Ltd, Registered Offices: Floraville, Boreenmanna Road, Cork is regulated by the Central Bank of Ireland.



All applicants must provide one type of verification document for A, B & C below. Tick one of each.

A. Type of Photo ID verification supplied
Passport Driving Licence Other (Please Specify)
B. Type of Address verification supplied (Headed paper, less than 6 months old, showing your name and address)
Utility Bill Bank Statement GOV Dept Letter Other (Please Specify)
C. Type of PPSN verification supplied
Drugs Payment Card European Health Insurance Card Payslip Other (Please Specify)
You must provide verification of your PPSN to comply with Revenue requirements for DIRT reporting. Return of Payments (Banks, Building Societies, Credit Union and Savings banks) regulations 2008, amended 2015, and the Credit Reporting Act 2013.
Items D,E & F must be provided where applicable. Tick as appropriate.
D. Copy of Garda ID/Payslip (Garda, Garda Staff and Garda Reserve applications)  Yes N/A
E. Copy of Marriage/Civil Partnership Certificate - (Spouse/Civil Partner applications)  Yes  N/A
F. Proof of co-habitation - (Partner applications) - see below  Yes  N/A
Partners require written confirmation from the Bond Holder that they are in a relationship with the Bond Holder, based on Section 172(2) of the Civil Partnership and Certain Rights and Obligations of Cohabitants Act 2010 and documentary evidence of one of the following:
<ul> <li>The basis on which the couple live together, e.g. evidence of joint ownership of a house or tenancy</li> <li>Production of Utility Bills from each person for same address</li> </ul>
The degree of financial dependence of either adult on the other or any agreements in respect of same
• The degree and nature of any financial arrangements between the adults including any joint purchase of an estate or interest in
land or joint acquisition of personal property
Whether there are one or more dependent children  Return your completed form, with supporting documentation, Freepost to;

FREEPOST CK424, Membership Committee, St. Paul's Garda Credit Union Ltd., Boreenmanna Road, Cork. T12 TN67

# Thank you for applying for membership of St. Paul's Garda Credit Union. Other members of your family may also be eligible to join.

Membership is open to Persons within our Common Bond, and members of their families, this includes:

- Serving members of An Garda Síochána including Trainee, Garda Staff and reserve
- Retired members of An Garda Síochána
- Permanent staff of organisations and bodies established to provide services to members of An Garda Síochána (organisations such as both St Paul's and St Raphael's Garda Credit Unions, St Paul's Garda Medical Aid, Garda Benevolent Trust, Garda Siochana Retired Members Association, International Police Association, GRA & AGSI representative bodies, Garda Pay and Pensions shared services)
- Spouse, Partner, and Children of any of the above

The above listed members are called the **Bondholder**. Current rules set out that family members (as defined below) who reside in the same household as the Bondholder can avail of membership.

**Family members**, means that person's father, mother, grandfather, grandmother, father-in-law, mother-in-law, spouse or civil partner, cohabitant, son, daughter, grandson, granddaughter, brother, sister, half-brother, half-sister, uncle, aunt, nephew, niece, first cousin, step-son, step-daughter, step-brother, step-sister, son-in-law, daughter-in-law, brother-in-law or sister-in-law.

**Partner** is defined in the context of the Civil Partnership and Certain Rights and Obligations of Cohabitants Act of 2010. Under this act, cohabiting couples are defined as opposite or same sex adults who are living together in an intimate and committed relationship.

## Membership Application Form- Explanatory Notes

Please read carefully before you complete the Membership Application Form
Please ensure that ALL relevant documentation is included with your application for membership
Incomplete forms will be returned to you for correction and/or clarification and will delay your application

#### SECTION 1. PERSONAL INFORMATION:

Personal Information sought to comply with current legislative and regulatory requirements. Please ensure that all the requested information is provided.

#### Why does St. Paul's need my PPS number?

To comply with the Revenue requirements for DIRT reporting. Return of Payments (Banks, Building Societies, Credit Unions and Savings Banks). Regulations 2008 and the Credit Reporting Act 2013.

#### **SECTION 2. Family Members:**

This section is to be completed and signed by the Bond holder when an applicant is applying for membership.

#### SECTION 3. POLITICALLY EXPOSED PERSON (PEP):

A PEP is an individual who is entrusted with a prominent public function, other than as a middle ranking or more junior official. A PEP includes the following

- heads of state, heads of government, ministers and deputy or assistant ministers;
- members of parliament or of similar legislative bodies;
- members of the governing bodies of political parties;
- members of supreme courts, of constitutional courts or of other high-level judicial bodies;
- members of courts of auditors or of the boards of central banks:
- ambassadors, charges d'affaires and high-ranking officers in the armed forces;
- members of the administrative, management or supervisory bodies of state-owned enterprises;
- directors, deputy directors and members of the board or equivalent function of an international organisation.

#### Family members of a PEP includes the following:

- any spouse of the politically exposed person;
- any person who is considered to be equivalent to a spouse of the politically exposed person under the national or other law of the place where the person or politically exposed person resides;
- any child of the politically exposed person;
- any spouse of a child of the politically exposed person;
- any person considered to be equivalent to a spouse of a child of the politically exposed person under the national or other law of the place where the person or child resides;
- any parent of the politically exposed person;
- any other family member of the politically exposed person who is of a prescribed class.

### A known close associate of a PEP includes the following:

- any individual who has joint beneficial ownership of a legal entity or legal arrangement, or any other close business relations, with the politically exposed person;
- any individual who has sole beneficial ownership of a legal entity or legal arrangement set up for the actual benefit of the politically exposed person.

This information is requested for the purpose of compliance with the credit union's obligations under Anti Money Laundering and Terrorist Financing legislation. If you are uncertain as to your status please discuss with the credit union.

#### **SECTION 4. TAX RESIDENCY:**

If you are Tax Resident in Ireland, tick Yes.

If you are Tax Resident in another country, please provide your Tax Identification Number ("TIN") and Country of Tax Residence, If your Tax residency changes you must notify the credit union.

This information is being sought for the purposes of reporting obligations under the Common Reporting Standard (CRS), as provided for by Section 891F of the Taxes Consolidation Act 1997. The information required to be reported under the CRS, including name, address, date of birth, place of birth, TIN, account number, account balance and payments on the account will be provided to the Revenue Commissioners and may be exchanged securely with another Competent Tax Authority in your jurisdiction of tax residence, but such information will at all times be treated with the strictest confidentiality as required by the Data Protection Acts 1988 and 2003 as amended by any national legislation and the GDPR 2016 from 25th May 2018. Only data that is legally required to be reported will be provided to the Revenue Commissioners. For more information on this, please speak to your credit union, contact Revenue at aeoi@revenue.ie or see http://www.revenue.ie/en/business/aeoi/

**SECTION 5. Method of Payment:** Please Complete

SECTION 6. Your Bank Account Details: Please Complete

**SECTION 7. Car & Cash Draw:** Tick Yes to join monthly car and cash draws with bumper draws at, Easter, Summer and Christmas. Copy of Draw Rules is available from our office or website. Must be 18 years of age or older.

### SECTION 8. Consent to use and process your personal data:

This section enables the credit union to comply with the General Data Protection Regulations (GDPR). We recommend and encourage you to opt-in to email marketing. You can change your mind and opt-out at any time.

**SECTION 9.** It is St. Paul's policy to provide all Statements and notifications electronically to our members

**SECTION 10. DECLARATION:** Complete all sections. You must sign and date the form here.

## Page 3 CHECKLIST - EVIDENCE OF ADDRESS, IDENTIFICATION & PPSN:

The Criminal justice Act, 2010 – 2013 places a statutory obligation on St. Paul's Garda Credit Union Ltd. to take reasonable measures to establish the identity of any person prior to the establishment of a business relationship with that person, and on an ongoing basis thereafter. You must provide proof of Identification with Date of Birth, and proof of Address.

**Proof of your PPSN** is required to comply with the Revenue requirements for DIRT reporting. Return of Payments (Banks, Building Societies, Credit Unions and Savings Banks) Regulations 2008 and the Credit Reporting Act 2013.

Before you return your Application Form, check that all sections are completed and signed where necessary. Complete the Checklist and ensure that ALL relevant documentation is included with your application. Incomplete forms will be returned to you for correction and/or clarification.