

Member Recruitment and Promotion



I would like to recommend the following person to become a member of Harlowsave Credit Union Limited.

Name _____

Address _____

Post Code _____

I understand that once the above named person completes an application form and saves for eight weeks with Harlowsave, I will have £5.00 deposited into my account.

Signed _____

Print Name _____

Membership No _____

Please send this completed form to the Harlowsave Credit Union office and feel free to make as many blank copies as you wish.

Data Protection Statement: In accordance with the principles of the Data Protection Act 1998, we will use your personal details for the purposes of managing your accounts with the credit union. Your personal details will be treated confidentially and will only be shared with other agencies for the purposes of credit referencing, project monitoring, and/or debt recovery.

Harlowsave purposes:

Date received in office: _____ Entered onto system: _____ Processed by: _____

Secure Savings | Ethical Investments | Low Cost Loans | Young Savers Accounts | Profit Sharing Dividends

Members' Line: 01279 451234 **Email:** admin@harlowsave.coop **Web:** www.harlowsave.coop

Registered Office: The Central Library, Cross Street, Harlow CM20 1HA

Harlowsave Credit Union Limited is authorised **by the Prudential Regulation Authority and is regulated by the Financial Conduct Authority and the Prudential Regulation Authority**, Firm Number 213273

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