

APPLICATION FORM FOR PRIVATE MEMBERS DRAW

NAME _____ ACCOUNT NUMBER _____ / _____

ADDRESS _____

I WOULD LIKE TO PARTICIPATE IN THE PRIVATE MEMBERS DRAW AND AUTHORISE THE CREDIT UNION TO DEDUCT THE APROPRATE AMOUNT FROM MY ACCOUNT EACH YEAR

I AGREE TO THE RULES OF THE PRIVATE MEMBERS DRAW.

I DO NOT AGREE TO THE RULES OF THE PRIVATE MEMBERS DRAW.