

**SHARE WITHDRAWAL APPLICATION** (please provide Identification when submitting application)



<b>Membership No.</b>		Adult	Junior
<b>Full Name</b>	Mr/Mrs/Miss/Ms		
<b>Address</b>			
<b>Telephone No.</b>			
<b>Email</b>			

<b>Please pay me the sum of</b>	£
<b>Saving Account</b>	Reg Shares / Santa Savers / Saving Account / Cash Tray

<b>Payment Method</b>	
Bank Payment	Sort Code:
	Account No:
	Bank Name:
	Name on Account:
Engage Card	Card No:
Bank Cheque	Payable to:

<b>Junior Account Holders – Named Parent/ Guardian of Account to Complete</b>	
I grant permission for _____ to withdraw £ _____ from his/her West Lothian Credit Union Junior Savers Account.	
Cash (please complete payment method above if cash not applicable)	

Print Name		
Signature		Date

<b>For Office Use</b> (complete when member present)				Day/Date
Payment Method	Cash	Cheque Chq No:	Bank Payment Ref:	Engage Card
Witness				

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