97a Church Street Kingston (876) 922-2009 (876) 618-1706

info@jtacreditunion.com http://jtacreditunion.com

MEMBER INFORMATION UPDATE

NAME:					
ADDRESS:					
MAILING ADDRESS: (IF DIFFERENT)					
EMAIL:		TRN #:		NIS#:	
MOBILE PHONE:	HOME PHONE:	OFFICE PHONE:		E:	
Driver's License	Passport	☐ Voter's ID ☐ Birth Certificate		Birth Certificate	
I.D. NUMBER:		EXPIRY DATE:	XPIRY DATE:		
REFERENCE #1 (Check Or	ne)				
Member of CU for 2 years or more Minister of Religion		<u> </u>	Princip	Principal	
Attorney-at-Law	Justice of the Peac	Justice of the Peace (JP)		Medical Doctor	
CU Employee at Supervisory Leve	el CU Board or Comr	CU Board or Committee Member		Police Officer (Inspector or higher)	
NAME OF REFEREE:		JOB TITLE:			
ADDRESS OF REFEREE:					
TELEPHONE: (MOBILE)	EMAIL:				
REFERENCE #2 (Check One)					
Member of CU for 2 years or more	_	Minister of Religion		Principal	
Attorney-at-Law	Justice of the Peac	Justice of the Peace (JP)		Medical Doctor	
CU Employee at Supervisory Leve	el CU Board or Comr	CU Board or Committee Member		Police Officer (Inspector or higher)	
NAME OF REFEREE:		JOB TITLE:			
ADDRESS OF REFEREE:					
TELEPHONE: (MOBILE)	EMAIL:	EMAIL:			
By signing this document, I certify that the information provided is true and accurate to the best of my knowledge.					
Member's Signature		Date			
Name of Witness		Signature			