



CORE CREDIT UNION
- STRONGER TOGETHER -

**Payroll Deduction
Authorisation
Form**

TO THE PAYROLL DEPARTMENT OF:
EMPLOYEE NAME:
DATE MADE PERMANENT:
PAYROLL NO:
CREDIT UNION MEMBER NO:
<i>If you are not a Member a membership application will need to be completed.</i>
HOME ADDRESS:

DEDUCTION BREAKDOWN	
TYPE OF ACCOUNT	DEDUCTION AMT. EACH PAYDAY
	€
Loan Account	€
Share Account	€
Stamp Account	€
	€
Family Accounts:	
A/C _____	€
A/C _____	€
A/C _____	€
A/C _____	€
TOTAL TO BE DEDUCTED FROM EACH PAYROLL	€

DEDUCTION START DATE

NOTE: This amount represents the total amount to be deducted per pay period and cancels any prior amount notified. **Stopping deductions does not close your account.**
To increase, decrease or stop your deductions please complete a new Payroll Deduction Authorisation Form.

- I hereby authorise and request you to deduct from each payroll period, the amount indicated above, and pay such amount to Core Credit Union Ltd. I understand my authorisation will continue until cancelled by me.
- I recognise that this deduction from my payroll is being made solely as a measure of convenience to me as a Member of Core Credit Union Ltd. and that the ultimate responsibility for ensuring that the deduction has been made, rests with me the Member. I recognise that beyond making remittance to Core Credit Union Ltd. of the sum concerned, my employer accepts no further responsibility in this matter.

Data Protection and Privacy Notice: The details provided in this application form together with any other information that is furnished to us in connection with this application will be retained and processed by Core Credit Union in accordance with the Privacy Notice which is available on our website and in any of our offices.

SIGNATURE: