

Share Withdrawal Application

Membership No Full Name

Address

Town/City Post Code

Telephone Mobile Date of Birth

Email

Amount £ by Cheque made out to

by Bank Transfer, Sort Code Account No

to Prepaid Card, Card No

by Encashment at Co-operative Bank

in Cash

- I understand the details I have supplied above will be used for identity verification.
- I understand that, if the balance of the account falls below £1, the account will automatically close

Signature Date

FOR OFFICE USE ONLY

Share Balance Before Withdrawal £ Share Balance After Withdrawal £

Loan Balance Before Withdrawal £

Signature of Officer Date