

Lifelong Learning Centre, Merfield Close, Sarn CF32 9SW / 1 Station Hill, Bridgend CF31 1EA

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School Savings Withdrawal Form

All information noted in this document will be treated as confidential by Bridgend Lifesavers Credit Union Ltd. It will only be dealt with by officers who have signed a legal declaration of confidentiality. **This form is to be completed by the parent/guardian who set up the account.**

Full Name:		Membership Number:	
Address:			
Post Code:		School/Class:	

Please note if you would like your child to withdraw more than £100, you can tick the BACs option for the FULL amount or tick both options if you would like your child to withdraw £100 cash with the remaining amount transferred by BACs.

Full Name of Parent/Guardian:	
Tel:	Email:

Savings Balance: £	Cash Withdrawal	Amount: £
	BACs Transfer	Amount: £

For BACs Payments Only	
Name on Account:	Bank Name:
Account Number:	Sort Code:
<p><i>We may contact you to confirm your account details. By signing this form, you are giving authorisation for BACs transfers to the above account until further notice. Please inform the credit union if your bank details change.</i></p>	

Signed:	Date:
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By signing this form, you are giving consent to the withdrawal from the above School Savings Account

Bridgend Lifesavers Credit Union

Privacy Policy: In accordance with the General Data Protection Regulation (GDPR), we will use your personal details to manage your account with the Credit Union. For more information on how we treat your personal data, please refer to our privacy policy. Bridgend Lifesavers Credit Union is authorised and regulated by the Prudential Regulation Authority (PRA) and the Financial Conduct Authority (FCA). It is a member of the Financial Services Compensation Scheme (FSCS).