

Junior ISA Account Application Form



Talk to us

0800 834 312

www.furnessbs.co.uk

Always with your interest at heart

Furness 
BUILDING SOCIETY

Junior ISA Account Application Form

IMPORTANT: All fields are mandatory and incomplete application forms may be returned and result in accounts not being opened. Before completing this form please ensure you have received the General Investment Terms and Conditions. Rules of the society are available on request. They provide important information about your account with the society. Please complete this form and then read and sign the agreement to assign and the declarations overleaf.

ACCOUNT INFORMATION

Opening Amount: Cash £ _____ Cheques* £ _____ Total £ _____

*Cheques should be made payable to the account holder only

I authorise you to transfer £ _____ to my Furness Account Number

If the child holds a Childs Trust Fund account it must be transferred as part of this application

Registered Contact (Parent or Legal Guardian) - This address will be used as the correspondence address

Mr/Mrs _____ Surname _____ First name and other initials _____ Date of Birth (dd/mm/yyyy)

Miss/Ms _____

National Insurance Number? _____

ADDRESS - Please enter your full permanent address below. Please note that we are unable to accept c/o addresses and PO Box Numbers.

 _____ Postcode

How long have you lived at this address? years. E-mail address _____

Tel No. Day Evening

Occupation: _____ Nationality: _____

PREVIOUS ADDRESS - If you have lived at your current address for less than 6 months, please provide full details of your previous address

 _____ Postcode

I apply to open a Cash Junior ISA for: Account Holder (Child) - at all times the beneficial owner of the investments held in the JISA

Mr/Mrs _____ Surname _____ First name and other initials _____ Date of Birth (dd/mm/yyyy)

Miss/Ms _____

National Insurance Number? _____

Childs Address - Please note that we are unable to accept c/o addresses and PO Box numbers

Postcode

Nationality _____ Existing customer ID recorded

Agreement to Assign

IF YOU HAD A SHARE ACCOUNT WITH THE SOCIETY ON 30TH SEPTEMBER 1999 AND HAVE KEPT THAT SHARE ACCOUNT EVER SINCE THAT DATE, THE WORDING IN PARAGRAPHS 1 TO 3 BELOW DOES NOT APPLY TO YOU. PLEASE LIST YOUR SHARE ACCOUNT NUMBER(S)

1. By applying to open a share account on or after 1st October 1999, I agree with the Society and the Charities Aid Foundation ("the CAF") that I will assign to the CAF (or to any charity(ies) nominated by it, or by the Society under the provisions of a deed dated 17th September 1999 between the Society and the CAF, in which case references to the CAF shall include references to any other charity(ies) but to no other person) the rights to any relevant conversion benefits (defined below). This obligation will not apply to me if I fall within any class of persons which, as at today's date, the Society wishes to be excluded from such obligation. This agreement is irrevocable and authorises the Society to transfer to the CAF any such benefits without further notice to me. I understand that neither the Society nor the CAF will release me from this agreement or vary its terms and (except as set out in paragraph 2 below) I will continue to be bound by the above condition even if the Society decides at some time in the future (and announces any such decision by press release (a "termination notice")) that it is no longer in the best interests of the Society to continue with the above assignment condition general in respect of new members.
- 2 (a) "Relevant conversion benefits" means any benefits to which I might become entitled as a shareholding member of the Society under the terms of any future transfer of the Society's business to a company (i.e. on a conversion or takeover) which is completed at any time within the 5 years immediate following the date on which my share account is opened. "Relevant conversion benefits" does not include (a) the statutory right to have shares in the Society (including any balances on share accounts) converted into deposits with the company on a conversion or takeover; (b) a right conferred under the terms of a transfer which is publicly announced by the Society more than 3 years after the Society has issued a termination notice.
(b) If the Society merges with any other society, after the date of such merger the "Society" includes such other society.
3. I authorise the Society to pass to the CAF such information relating to me and my accounts with the Society as the CAF may reasonable require in order to administer this agreement to assign and the relevant conversion benefits and for no other purpose. I consent to both the Society and the CAF holding and processing such information for such purposes. A list of the classes of persons which the Society currently wishes to be excluded from the obligation to assign (this list may change from time to time but not with retrospective effect) is available on request from the Society's Secretary at its principal office.

Standard Customer Agreement

This is our standard customer agreement upon which we intend to rely. For your own benefit and protection you should read these terms carefully before signing them. If you do not understand any point please ask for further information

- (a) I confirm that I have read the product terms and conditions relating to the account I am opening and that I have received the General Savings Terms and Conditions and agree to be bound by them and the Rules of the Society (copies of which are available on request) and any subsequent terms and conditions and Rules for the time being in force.
- (b) I confirm that I am aware that the type of account I am opening is a share account and I understand that the young person is the Account Holder and the member and subject to the Rules of the Society, will obtain voting rights when he/she attains the age of 18 years.
- (c) I agree to be bound by the conditions relating to the Agreement to Assign as described above.
- (d) I understand that the young person is the Account Holder and the sole beneficiary of this account. Any adult operating the account does so as agent for the Account Holder (young person).
- (e) The Society may require verification of the Account Holder's (young person's) identity at any time before maturity at the age of 18.
- (f) I agree that this account (including all the provisions in this form) and all dealings on it will be subject to English law. If any provision is for any reason unenforceable, this will not affect the enforceability of any other provision.
- (g) I consent to the Society using electronic means to verify my identity if required.

Marketing Choices

The Society, or members of the Society's group of companies, requires your permission to contact you for the purposes of marketing its products and services which we think may be of interest. A list of these companies is available on request. We also require your permission to pass on details to third parties who may contact you about marketing services or products to you.

If you would like us to keep you up to date with our products, services and promotions, please let us know by ticking one of the boxes below. You'll need to give us individual permission for each type of communication. If you want to change your permissions please let us know.

I consent to Furness Building Society contacting me for marketing purposes in the following ways:

By post	Child <input type="checkbox"/>	Registered Contact <input type="checkbox"/>
By email	Child <input type="checkbox"/>	Registered Contact <input type="checkbox"/>
By SMS (text message)	Child <input type="checkbox"/>	Registered Contact <input type="checkbox"/>
By phone	Child <input type="checkbox"/>	Registered Contact <input type="checkbox"/>

I consent to Furness Building Society:

sharing my information (in this form and about my account/s) for marketing purposes with other companies within the Furness Building Society group.	Child <input type="checkbox"/>	Registered Contact <input type="checkbox"/>
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sharing my information (in this form and about my account/s) for marketing purposes with other companies which the Society has a business relationship with.	Child <input type="checkbox"/>	Registered Contact <input type="checkbox"/>
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ISA declarations

I declare that

- I am 16 years of age or over
- I am the child/I have parental responsibility for that child (delete which does not apply)
- I/the child does not have a Child Trust Fund account
- I will be the registered contact for the JISA
- The child is resident in the UK, or is a UK Crown servant, a dependant of a UK Crown servant or is married to/in a civil partnership with a UK Crown servant
- I have not subscribed and will not subscribe to another JISA of this type for this child
- I am not aware that this child has another JISA of this type
- I am not aware of other JISA subscriptions that will result in this child exceeding the annual limit
- I will not knowingly make subscriptions to JISAs for this child that will result in the subscription limit being exceeded

I authorise Furness Building Society:

- to hold the child's subscriptions, JISA investments, interest, dividends and any other rights or proceeds in respect of those investments and cash, and
- to make on the child's behalf any claims to relief from tax in respect of JISA investments.

For the purposes of this declaration, any account containing a nil balance following the transfer of investments to another JISA may be disregarded.

*The UK means England, Scotland, Wales & Northern Ireland. It does not include anywhere outside the UK. In particular it does not include the Channel Islands or Isle of Man.

Privacy and Your Personal Information

I confirm that I have received a copy of 'Key Facts about your personal information and what we do with it' which tells me how Furness Building Society processes my information and what my rights are. Child Registered Contact

Further information about how your privacy and personal data is processed is available on request or by visiting www.furnessbs.co.uk/privacy-page

Financial Services Compensation Scheme

I confirm that I have received a copy of the Financial Services Compensation Scheme Information Sheet Child Registered Contact

I agree to the JISA terms and conditions. I declare the information provided in this application form is complete and correct to the best of my knowledge and belief.

Signed: _____ Date: _____

Registered Contact: _____ Date: _____

FOR OFFICE USE ONLY

ACCOUNT NUMBER	APPLICANT 1 CUSTOMER NUMBER	APPLICANT 2 CUSTOMER NUMBER	
INTERVIEWER	INPUT BY	DATE OPENED	DATA CHECKED BY INPUTTER? YES/NO
AUDITED BY	DATE AUDITED		