

GRACE CO-OP. CREDIT UNION LIMITED

Application & Agreement Form for Fixed Deposit Accounts

I,, account #ask that Grace Co-operative Credit Union Limited open a Fixed Deposit Account on my behalf in the amount of \$ for a period of days at its going rate of interest. Additionally, this is your authority to roll over the investment for the same period on expiry, unless otherwise advised by me in writing, at the rate of interest prevailing on Fixed Deposits in the Credit Union at that time. I also agree that in the event I request that the investment be broken before maturity, then a penalty will be applied at the rate of the higher of 1% or such penalty as applied by the Jamaica Co-operative Credit Union Limited.

Signed:

Date:

For internal use only:

Name of Member:

Account Number:

Period of Investment

Interest Rate

Investment Date

Expiry Date

Prepared by:

Approved by: