HULL AND EAST YORKSHIRE CREDIT UNION



CHILD TRUST FUND ACCOUNT

EXTERNAL TRANSFER APPLICATION

Applicant's title (if any)	Forename(s)	Surname
Address		
	Postcode	
I apply to transfer a Child Trust Fund for:		
Child's title (if any)	Forename(s)	Surname
Child's Address		
	Postcode	
Child's Date of Birth		
Child's Unique Reference		
Number		
Current CTF providers Name		
& Address		
Type of CTF with the new provider: Non-stakeholder		
I declare that:		

- I am 16 years of age or over
- I am the child named on the voucher / I have parental responsibility for that child (delete which does not apply)
- I am the registered contact for the Child Trust Fund.

I authorise Hull and East Yorkshire Credit Union Limited:

- To hold the child's HM Revenue & Customs contributions, subscriptions, CTF investments, interest, dividends and any other rights or proceeds in respect of those investments and cash, and
- To make on behalf of the child any claims to relief from tax in respect of CTF investments.

I agree to the CTF terms and conditions.

Signed:

Date:

Form CTF 3 Version 03/10