

# Cash Child Trust Fund Application

**Important:** Before completing this form please note the terms and conditions relevant to the Child Trust Fund account and the rules of the Society.

Please complete this Form in **BLOCK CAPITALS** and then **READ AND SIGN THE DECLARATION OVERLEAF**.  
If you require any assistance in completing this form please contact your local branch.

## ACCOUNT INFORMATION

I apply to open:

Type of account: **CHILD TRUST FUND**

Opening Investment - Value of Voucher £ \_\_\_\_\_ Value of Transfer in £ \_\_\_\_\_

Value of any additional investment - Cheque £ \_\_\_\_\_

**Note:** For **new applications** this form must be submitted with the original Child Trust Fund Voucher with the attached HM Revenue & Customs letter intact.  
For **transfers in** we will also require you to complete the Society's 'Transfer In' form.  
In some circumstances further identification may be required.

## CHILD'S PERSONAL DETAILS

Mr/Miss	Surname	First name	Middle initial
_____	_____	_____	_____

ADDRESS - Please enter the child's full permanent address. Please note that we are unable to accept c/o addresses and P.O. Box Numbers.

\_\_\_\_\_  
\_\_\_\_\_

Date of birth (dd/mm/yy): \_\_\_\_\_

Child's Unique Reference Number: \_\_\_\_\_  
(shown on voucher)

Postcode \_\_\_\_\_

Tel No. Day \_\_\_\_\_ Evening \_\_\_\_\_

## PERSONAL DETAILS OF REGISTERED CONTACT (as shown on HM Revenue & Customs correspondence)

Mr/Mrs Miss/Ms	Surname	First name	Any other name(s) - HM Revenue & Customs rules require FULL names to be given.
_____	_____	_____	_____

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

\_\_\_\_\_  
\_\_\_\_\_

Date of birth (dd/mm/yy): \_\_\_\_\_

Email Address: \_\_\_\_\_

Postcode \_\_\_\_\_

Tel No. Day \_\_\_\_\_ Evening \_\_\_\_\_ Mobile: \_\_\_\_\_

## INTEREST INSTRUCTIONS:

Interest will be added to the account at midnight on the day before the child's birthday.

**PLEASE READ THE AGREEMENT TO ASSIGN WINDFALLS TO CHARITY AND THE DECLARATIONS OVERLEAF BEFORE SIGNING THIS FORM**

FOR OFFICE USE ONLY (must be completed in BLACK)

Terms and Conditions have been supplied

Membership Classification (Child Trust Fund)

Face to face? YES  NO

Branch/Agency code \_\_\_\_\_

Account Type \_\_\_\_\_

Postal Title \_\_\_\_\_ Child's Customer No: \_\_\_\_\_ Registered Contact Customer No: \_\_\_\_\_

Input by \_\_\_\_\_ Date \_\_\_\_\_ Checked by \_\_\_\_\_ Amended by \_\_\_\_\_ Account No \_\_\_\_\_

## AGREEMENT TO ASSIGN WINDFALLS TO CHARITY

New investing members from 2 October 2000 are subject to the Society's Charitable Assignment Scheme, full details are set out in our General Investment Terms & Conditions.

## DATA PROTECTION

Information which you provide to Ipswich Building Society or which is obtained by us through our dealings with you may be held on our computers and in other ways and used by us to administer your account, for statistical analysis, for debt collection and fraud prevention and to bring to your attention (by mail, telephone, email or otherwise) products or services of Ipswich Building Society or other selected suppliers which may be of interest to you. With respect to your agreement to assign, to the Charities Aid Foundation or its successor(s) ("the CAF"), your rights to any relevant conversion benefits, we will pass on to the CAF such limited information relating to you and your account as may be necessary to fulfil your agreement to assign. Such information shall only be passed on to the CAF in the event that the Society is to transfer its business to a company (ie: on a conversion or takeover).

We will not provide your details to third parties for marketing purposes. We may however contact you with details of the **Society's other products or services**, which may be of interest to you. If you **do not** wish to be contacted with this information please tick the appropriate boxes.

By Post                       By Telephone                       By Email

You can request that the Society does not use your information for marketing purposes by writing to PO Box 547, Ipswich, IP3 9WZ.

You may request in writing, upon payment of a fee, a copy of the details held about you by the Society.

## DECLARATION

### I declare that:

- I am 16 years of age or over
- I have parental responsibilities for the child named overleaf.
- I will be the registered contact for the Child Trust Fund.
- I have received a copy of the **terms and conditions relating to the account**, along with a copy of the **General Investment Terms & Conditions, Child Trust Fund Key Features Document** and **Customer Information Leaflet** and agree to be bound by them.
- I agree that as well as the account conditions, the **Society's Rules** apply to this account and we can obtain a copy of these on request.
- The sum is being invested by me as representative for the beneficial owner in a share account.
- I will not hold the share account as a bare trustee for a body corporate, or for persons who include a body corporate.
- I have read the above section entitled **Data Protection**. I agree to the processing of my and the child's personal data for the purposes of opening and administering the account, contacting me or the child where necessary, fraud prevention and detection, legal and regulatory compliance, market research, statistical analysis and after closure of the account for statutory, regulatory, accounting, auditing or other lawful requirements.
- I confirm that the information and instructions on this form are **complete and accurate**.

### I authorise Ipswich Building Society, until a further application and declaration is made to:

- Hold the child's HM Revenue & Customs contributions, subscriptions, Child Trust Fund investments, interest, dividends and any other rights or proceeds in respect to those investments and cash.
- Make on the child's behalf any claims to relief from tax in respect of Child Trust Fund investments.

## REGISTERED CONTACT

Signature \_\_\_\_\_

Date \_\_\_\_\_



## IMPORTANT CHECKLIST

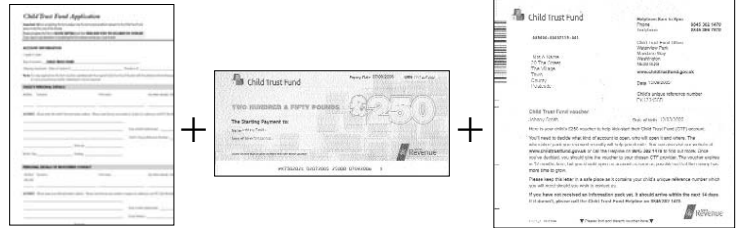
### To apply for the Ipswich Cash Child Trust Fund (Non-Stakeholder)

To enable us to process your Child Trust Fund effectively, please use this checklist to ensure you send us all the documents we require. If you have any questions or are unsure of anything, please call us on 0845 230 8686.

I confirm I have enclosed all of the following items: (photocopies cannot be accepted)

(Please tick relevant box)

- Yes  No  Child Trust Fund Application Form
- Yes  No  Child Trust Fund Voucher
- Yes  No  Child Trust Fund Letter (above voucher)  
*We need this to prove your identity and address*



If 'No' If you have mislaid/destroyed the Child Trust Fund Letter, we need ALL of the following items to prove your identity and address. These must be dated within the last 3 months.

- Photocopy of Child Benefit correspondence
- Photocopy of Birth Certificate
- Photocopy of a Bank Statement or Utility Bill (eg Gas, water, Council Tax etc) showing current address.

I confirm that:

Yes  No  I am the parent named on the Child Trust Fund letter

If 'No' If you are not the parent named on the letter, you need to complete a Change of Registered Contact form and provide us with a photocopy of current passport or driving licence. Please call us on 0845 230 8686 to request this form and we will explain which documents we require to prove your identity. In the meantime please do not send us your application or voucher.

Yes  No  My name on the Child Trust Fund letter is correct

If 'No' If your name is incorrect, we need further identification from you. For example, if you have married and your family name has changed, we need to see a copy of your marriage certificate. Please call us on 0845 230 8686 if you have any questions.

- I have enclosed a copy of my marriage certificate
- I have enclosed .....

Yes  No  My address on the Child Trust Fund letter is correct

If 'No' If your address is incorrect, we need proof of your new address. Please enclose a copy of one of the following documents which shows your new address and is dated within the last 3 months:

- Driving License
- Utility Bill (eg gas, electric, council tax etc)

Please return this form along with all the required documents to us in the enclosed pre-paid envelope.

**HELPLINE 0845 230 8686**  
8.30am – 5pm Monday to Friday  
9am – 1pm Saturday

### The next step

On receipt of your application, we will process the information immediately and apply to the Inland Revenue for your money. This may take up to 4 weeks to come through. On receipt, we can then activate your account and will send to you a Child Trust Fund Certificate of Investment, showing your child's details, account number and amount of investment. We will also enclose the original Child Trust Fund letter, however we do not return any photocopies received. Once the account has been activated, you can make additional payments into the account if you so wish, by either sending us a cheque(s) or by setting up a standing order with your bank. Daily interest is calculated from the date the account is activated.