



Laborie Co-operative Credit Union Ltd.

Allan Louisy Street, Laborie | Clarke Street, Vieux Fort

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Website: www.mylaboriecu.com | Email: info@mylaboriecu.com

Vision Account

Date of application:

Branch:

Time:

Name:

Account No.:

I promise to save at least \$

Weekly

Fortnightly

Monthly

Bi-Monthly

for

consecutive periods. I understand that if I break this commitment for whatever reason, the total

interest of \$

which will be credited to my account at the end of my contractual savings period of at least

\$

will be forfeited. I further understand that the interest is not withdrawable by me during

the period of contractual savings from

to

Signature of Member

Signature of Credit Union Official