

# Child Trust Fund Transfer form



**Fill in this form if you wish to transfer your child's CTF account from another provider to Clockwise.**

## Child's Personal Details

Forename \_\_\_\_\_ Surname \_\_\_\_\_

Date of birth \_\_\_ / \_\_\_ / \_\_\_\_\_

Unique reference number  
(as on voucher)

Permanent residential address

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

Postcode \_\_\_\_\_

## Personal details of registered contact

Title \_\_\_\_\_ Forename \_\_\_\_\_ Surname \_\_\_\_\_

Permanent residential address

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

Postcode \_\_\_\_\_

Signed \_\_\_\_\_

## CTF current provider

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Account n.o \_\_\_\_\_

Make any cheques payable to: **Leicester Credit Union Ltd**

**Please return to Clockwise after completing this form.**