



Aero Services Credit Union Co-operative Society Limited

12-14 Orange Grove Road, Tacarigua 340606, Trinidad and Tobago, W.I.

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CRED-U-MED APPLICATION/RENEWAL FORM

DATE: _____

MEMBER NAME: _____

CONTACT NUMBER: _____

EMAIL ADDRESS: _____

FORM TYPE: ☐ New Application ☐ Renewal

PAYMENT METHOD:

☐ Cash ☐ Cheque ☐ Shares Transfer ☐ Flex-A-Save Transfer ☐ Loan ☐ ACH/Bank deposit

PAYMENT FREQUENCY:

Monthly ☐ Quarterly ☐ Semi-Annually ☐ Annually

PLAN SELECTION:

TYPE OF MEMBERSHIP	EXISTING AND NEW MEMBERS <60 YEARS PLAN - \$500,000 Monthly Rate	EXISTING MEMBERS ONLY OVER 60 YEARS PLAN \$400,000 Monthly Rate
Member Only	\$566.00 ☐	\$1,489.00 ☐
Member Plus One	\$966.00 ☐	\$2,540.00 ☐
Member and Family	\$1,530.00 ☐	
Annual Maximum Claim	\$500,000	\$400,000

MEMBER SIGNATURE: _____

FORM RECEIVED BY: _____

DATE RECEIVED: _____