

MEMBERSHIP APPLICATION

NEW ACCOUNT, ADD ACCOUNT, NAME CHANGE, AND BENEFICIARY CHANGE.

Member Number

ACCOUNT TYPE

All terms, conditions, form of account ownership, account selection and other information indicated on this card apply to all the accounts listed below unless the Credit Union is notified in writing of a change.

<input checked="" type="radio"/> Share Savings	<input type="radio"/> Share Draft (Checking)	<input type="radio"/> Christmas Club	<input type="radio"/> Certificate of Deposit (CD)	<input type="radio"/> Other
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MEMBER APPLICATION AND OWNERSHIP INFORMATION

Name			
Street			
City, State Zip			
SSN		DOB	
ID		Work	
Phone (H)		Phone (W)	
Email (H)		Email (W)	

TIN CERTIFICATION AND BACKUP WITHHOLDING INFORMATION

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding because of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification Instructions. Cross out 2 above if you've been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. Cross out item 3. Complete a W-8 BEN if you are not a U.S. person.

AUTHORIZATION

By signing below, I/we agree to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Rate and Fee Schedule, Funds Availability Policy Disclosure, if applicable, and to any amendment the Credit Union makes from time to time which are incorporated herein. I/We acknowledge receipt of a copy of the Agreement and Disclosures applicable to the accounts and services requested herein. If an access card or EFT services is requested and provided, I/we agree to the terms of and acknowledge receipt of the Electronic Funds Transfer Agreement. *The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.*

SIGNATURE

DATE

SIGNATURE

DATE

ACCOUNT SERVICES

<input type="radio"/> Chip Card / Debit Card
<input type="radio"/> Courtesy Pay
<input type="radio"/> Overdraft Transfer
<input type="radio"/> Transfer from another bank or credit union

<input type="radio"/> Online Banking
<input type="radio"/> Mobile Banking
<input type="radio"/> Audio Response
<input type="radio"/> Transfer to another bank or credit union

JOINT ACCOUNT OWNERSHIP

Designate the ownership of the account(s) and / or the responsibility for the service(s) requested.

- Individual
 Joint with Survivorship
 Joint without Survivorship

Joint Owner #1

Name		SSN	
Street		Driver's License	
City, State, Zip		Date of Birth	
Phone (H)		Phone (W)	
Email (H)		Email (W)	

Joint Owner #2

Name		SSN	
Street		Driver's License	
City, State, Zip		Date of Birth	
Phone (H)		Phone (W)	
Email (H)		Email (W)	

*Attach additional member applications for more joint owners.

ACCOUNT DESIGNATION

- Payable on death
 All accounts
 Designate accounts _____

POD Payee		POD Payee	
Percentage		Percentage	
Street		Street	
City, State, Zip		City, State, Zip	
SSN		SSN	
Phone (H)		Phone (H)	

- Agency
 Name of agent _____
 Signature of agent _____
 Date _____
 Designate Accounts _____
 UTMA / UGMA _____
 Custodian for _____
 UTMA Minor SSN _____
 Other _____

Credit Union Use Only

- | | | |
|---|--|-----------------------------------|
| <input type="radio"/> Membership Disclosure | <input type="radio"/> Online Banking | <input type="radio"/> CBR Score |
| <input type="radio"/> Identification | <input type="radio"/> Mobile Banking | <input type="radio"/> ChexSystems |
| <input type="radio"/> Social Security Card or W-9 | <input type="radio"/> Checks Ordered | <input type="radio"/> Chip Card |
| <input type="radio"/> Reg E. Opt-in Opt-out | <input type="radio"/> Credit Card Prequalification | <input type="radio"/> Other |