

Credit Union Membership Application

Please fill out the account card below - you can either print it out and fill in the requested information, or fill it out online and we will receive it in our office the next business day. Either way, you will still need to come by the office to bring us a copy of a picture ID.

Member Application and Ownership Information

Name: _____

Member Number: _____

Security Code: _____

SSN/TIN: _____

Street Address: _____

City/State/Zip: _____

Driver's License Number: _____

Date of Birth: _____

Email: _____

Home Phone: _____ Work Phone: _____

Employment: _____

Eligibility of Membership: _____

Tin Certification and Backup Withholding Information

Under penalty of perjury, I certify that ALL of the following are true:

1. The Social Security or Taxpayer ID Number entered 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 as a result of 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).

By answering YES I certify, under penalty of perjury, that ALL of the above statements are true:

Yes No

If you answered NO above, please explain under penalty of perjury which statements are not true and describe your current situation:

AUTHORIZATION

By submitting this application, 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 service 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.

Sign: _____
Date: _____

Sign: _____
Date: _____

Sign: _____
Date: _____

Sign: _____
Date: _____