

ACCOUNT CARD

ACCOUNT TYPE

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

Suffix*	Suffix*
<input type="checkbox"/> Share/Savings _____	<input type="checkbox"/> Money Market _____
<input type="checkbox"/> Share Draft/Checking _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Share Certificate _____	<input type="checkbox"/> Other _____

*The account number for each of the accounts listed above consists of the suffix added to the end of the Member Number listed below. If this card applies to more than one account of the same type, note that one suffix will be listed for that account type.

MEMBER APPLICATION AND OWNERSHIP

Member/Owner _____	Member No. _____
Street _____	SSN/TIN _____
City/State/Zip _____	Driver's Lic. No. _____
Home Phone () _____ <input type="checkbox"/> Listed <input type="checkbox"/> Unlisted	Date of Birth _____
Work Phone () _____	Password _____
E-mail _____	Employment _____
Eligibility for Membership _____	

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 as a result 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 item 2 above if you have 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 and complete a W-8 BEN if you are not a U.S. person.

ACCOUNT OWNERSHIP

Designate the ownership of the accounts and responsibility for the services requested.

Individual **Joint Account with Survivorship** **Joint Account without Survivorship**

Joint Owner _____ SSN/TIN _____

Street _____ Driver's Lic. No. _____

City/State/Zip _____ Date of Birth _____

Home Phone () _____ Password _____
 Listed Unlisted

Email _____

Work Phone () _____

Joint Owner _____ SSN/TIN _____

Street _____ Driver's Lic. No. _____

City/State/Zip _____ Date of Birth _____

Home Phone () _____ Password _____
 Listed Unlisted

Email _____

Work Phone () _____

ACCOUNT DESIGNATIONS

Payable on Death (POD)/Trust Account

Beneficiary/POD Payee _____ Beneficiary/POD Payee _____

Street _____ Street _____

City/State/Zip _____ City/State/Zip _____

Agency Print name of Agent _____

Signature _____ (date) _____

UTTMA/UGMA (as custodian for _____ (minor) under the Uniform
Transfer/Gifts to Minors Act) Minor's TIN/SSN _____

Other _____ See Account Authorization Card

AUTHORIZATION

By signing below, I/we agree to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Disclosure, 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 of EFT service is requested and provided, I/we agree to the terms of an acknowledge receipt of the Electronic Funds Transfer Agreement. ***The Internal Revenue Service does not require consent to any provision of this document other than the certifications required to avoid backup withholding.***

X _____
Signature Date

X _____
Signature Date

X _____
Signature Date

X _____
Signature Date

FOR CREDIT UNION USE ONLY

See Account Change Card

See Insurance Beneficiary Card

Date of Membership _____ Opened/App'd by _____ Member Verification _____

Credit Report

Check Verify

PIN Request

Access Card

Audio Response

PC Access/Internet Banking