ACCOUNT CARD ACCOUNT TYPE

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

	Suffix*		Suffix*
Share/Savings		Money Market	
Share Draft/Checking		Other	
Share Certificate		Other	
*The account number for each of the ac Number listed below. If this card appli listed for that account type.			
MEMBER A	PPLICATION AN	ND OWNERSHIP INFORMAT	TON
Member/Owner		Member No.	
Street			
City/State/Zip			
Home Phone ()			
Listed	Unlisted		
Work Phone ()			
E-mail			
Eligibility for Membership			
TIN CERTIFICA	TION AND BAC	KUP WITHHOLDING INFORM	MATION
Under penalties of perjury, I certi			
(1) The number shown on this fo	•	ect taxpaver identification i	number.
 (2) I am not subject to backup v (b) I have not been notified withholding as a result of a r me that I am no longer subject (3) I am a U.S. person (including Certification Instructions: Cross subject to backup withholding becomes out item 3 and complete a W 	by the Interna failure to repor ct to backup w a U.S. resident out item 2 above ause you have fai	If Revenue Service (IRS) that all interest or dividends, withholding, and talien). If you have been notified by that the torreport all interest and dividends.	nat I am subject to backup or (c) the IRS has notified the IRS that you are currently
	AUTH	ORIZATION	
By signing below, I/we agree to the ter Rate and Fee Schedule, Funds Availabili from time to time which is incorporated applicable to the accounts and services agree to the terms of and acknowledd Service does not require your conset to avoid backup withholding. X Signature	ty Policy Disclosure d herein. I/We ack requested herein. ge receipt of the	e, if applicable, and to any amer knowledge receipt of a copy of If an access card or EFT service Electronic Funds Transfer Agree	ndment the Credit Union makes the Agreement and Disclosures is requested and provided, I/we ement. The Internal Revenue
XSignature	Date	X Signature	 Date
Jigilalule	Date	Jigilature	Date

	ACCOUNT SERV	ICES REQUESTED
Payroll Deduction/Direct Deposit		ATM Card
Overdraft Protection (indicate transfer priority below)		Debit Card
		Audio Response
		Other
	ACCOUNT (OWNERSHIP
Decianate the awnershi	ip of the accounts and responsibility	
Individual		vorship
	X	
loint Owner		SSN/TIN
City/State/Zip		Date of Birth
		Password
	Listed Unlisted	E-mail
/Vork Phone () .		
loint Owner		SSN/TIN
Home Phone ()		Password
	Listed Unlisted	E-mail
Work Phone ()		
	ACCOUNT D	ESIGNATIONS
☐ Pavable on D	Peath (POD)/Trust Account	
		POD Payee
•		Street
		City/State/Zip
	count Print Name of Convenienc	
		Date
☐ Personal Custod		- Juli
UTTMA (as custod		(minor) under the
Uniform Transfers/G		5N , ,
		See Account Authorization Card.
FOR CREDIT UNION	I LISE ONLY	
TOR CREDIT UNION	V OJE VIVEI	
Opened/App'd by	Membership Of	fficer Date