



New Membership Application

To open an account, submit a completed application and initial funds for deposit, by mail or in person to your local branch. Indicate below how the funds are to be distributed in your account. *\$25.00 minimum deposit to open.

\$ _____ Checking \$ _____ Savings
 \$ _____ Money Market \$ _____ Term Certificate (CD)
 \$ _____ IRA \$ _____ Other _____

1 Primary Member									
First Name (first, middle initial)		Last Name		Date of Birth (mm/dd/yyyy)		E-mail Address			
Primary Address (cannot be P.O. Box)				Social Security Number		Home Phone		Business Phone	
City		State/Province		ZIP/Postal Code		Country		City of Birth	
Mailing Address				Mother's Maiden Name		Driver's License Number		State Issued	
City		State/Province		ZIP/Postal Code		Country		How did you hear about XXX Credit Union?	

2 Membership Eligibility (Check one)		Employed by Member	Related to Member	Live in qualifying region
Member Company Name		Qualifying Region Name		
Member Name		Relationship		Their Account Number

3 Joint Owner									
First Name (first, middle initial)		Last Name		Date of Birth (mm/dd/yyyy)		E-mail Address			
Primary Address (cannot be P.O. Box)				Social Security Number		Home Phone		Business Phone	
City		State/Province		ZIP/Postal Code		Country		City of Birth	
Mailing Address				Mother's Maiden Name		Driver's License Number		State Issued	
City		State/Province		ZIP/Postal Code		Country		How did you hear about XXX Credit Union?	

4 Designation of Beneficiary(ies) <small>Beneficiary to receive assets of accounts only in the event of death of all owners of the accounts.</small>											
First Name	Last Name	Street Address	City	State	Zip	Birthdate	Social Security #	Spouse	Relationship	Type of Beneficiary	Share %
		same as Primary Member						Yes		Primary	
								No		Contingent	____%
		same as Primary Member						Yes		Primary	
								No		Contingent	____%

5 General Authorization	
<p>I apply for membership and/or request that Hypothetical Credit Union open any of the following accounts upon my depositing funds in them: Regular Savings, Checking, Money Market, Term Certificates, IRA. If this application is approved, I understand I may be issued and Automated Teller Machine (ATM) Access Card/Personal Identification Number (PIN) and an EASY ACCESS (telephone banking) code, unless I tell you not to issue them. I also understand that your policy and the law permit you to delay my access to noncash deposits as explained in the Disclosure Statement.</p> <p>I authorize Hypothetical Credit Union to obtain reports from the Department of Motor Vehicles and a credit reporting agency.</p>	
Member Signature _____	Date _____
Joint Owner Signature _____	Date _____