

Joint Membership Application

Primary Applicant

Joint Applicant

Request Date	
Social Security Number	Social Security Number
First Name	First Name
Middle Name	Middle Name
Last Name	Last Name
E-mail Address	E-mail Address
Daytime Phone Number	Daytime Phone Number
Home Phone Number	Home Phone Number
Street Address	Street Address
Street Address Apt/Suite	Street Address Apt/Suite
City	City
State	State
Zip	Zip
Date of Birth	Date of Birth
Driver's License Number	Driver's License Number
Employer	Employer
Work Phone Number	Work Phone Number
Name of Supervisor	Name of Supervisor
Payable on Death	Payable on Death
<p>Authorization Notice: By submitting this application to the credit union, you certify that everything you have stated in this application is correct to the best of your knowledge. You understand that the credit union will rely on the representations you make in this application when deciding whether to grant membership. You agree to immediately notify us of changes to any of the information you have provided in this application. You understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information on applications made to Federal Credit Unions insured by the National Credit Union Administration.</p> <p>IMPORTANT INFORMATION: PROCEDURES FOR OPENING A NEW ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.</p>	