

**CBI Federal Credit Union**

**Application for Membership and Account Agreement**

\*Must be thoroughly completed for processing and submitted **with a copy of current Photo ID for all owners**

Member Name _____	Date Closed _____
Date Opened _____	
Approved _____ OFAC verified _____	(For Credit Union Use Only)

Applicant Name: \_\_\_\_\_  
 Residential Street Address: \_\_\_\_\_  
 City, State Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_  
 Employer Name \_\_\_\_\_ Work Location \_\_\_\_\_  
 Birth Date: \_\_\_\_\_ ID Presented D.L. # \_\_\_\_\_  
 Social Security Number (SSN): \_\_\_\_\_ Member Number \_\_\_\_\_  
 (completed by CU)

I understand that I must subscribe to at least one share in the Credit Union in a share savings account. This **Share Savings account** will be a(n) \_\_\_\_\_ **Individual** account \_\_\_\_\_ **Joint** account.

**Payable on Death Designation**

Printed Name	Date of Birth	Social Security Number	Relationship to Member
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I am also interested in opening the following accounts: (Circle Individual or Joint)

- Share Draft Checking      Individual      Joint       Special Savings      Individual      Joint
- Holiday Club Savings      Individual      Joint       IRA Savings
- Term Share Certificate      Individual      Joint

Please send me information and an application for the following services provided by the Credit Union:

_____ Audio Response	_____ VISA
_____ Virtual Branch (Online Access)	_____ Loan – Auto, Signature, Holiday, etc
_____ CU Check card	_____ First Mortgage Loan

By signing below I am applying for membership in this Credit Union, agree to follow by its bylaws and amendments, pay any membership or entrance fee and subscribe for at least one \$25 share. **I also consent to having my credit report checked as a means of verifying my identity.** I qualify for membership in this Credit Union because \_\_\_\_\_.

The undersigned agree(s) to the terms stated on this application and agreement as well as those stated in the **account information brochure** delivered to this member on \_\_\_\_\_.

Certification: Under penalties of perjury, I certify:

- (1) that the number shown on this form is my correct taxpayer identification number
- (2) that I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding and
- (3) that I am a U.S. Person (including a U.S. resident alien).

Instruction: You must cross out item (2) above if you have been notified by the IRS that you are currently subject to backup withholding because of underreporting interest or dividends on your tax return.

Signature (1): \_\_\_\_\_ Date: \_\_\_\_\_  
 Printed Name (1): \_\_\_\_\_ SSN: \_\_\_\_\_  
 Signature (2): \_\_\_\_\_ Date: \_\_\_\_\_  
 Printed Name (2): \_\_\_\_\_ SSN: \_\_\_\_\_