

MEMBERSHIP APPLICATION FORM

NOTE: Federal Law requires us to collect and verify your name, address, Social Security Number and birth date.

Please send a copy of two (2) forms of qualifying identification: Driver's License, S.S. card, Passport, Work ID, State ID, or School ID

MEMBER INFORMATION		Account #	Approval Code			
Last Name						
	red					
	ifferent					
_		-				
				Email Address Mother's Maiden Name		
EmployerSoc. S		•		Work Phone		
		-		Work Priorite		
	ty			lacuana	Fymires on	
	I.D. #					
	I.D. #			ssuance	_ Expires on	
□ Share/Savings □ U Name It Savings □		☐ Kids Club Savings	** Application Required ☐ Advantage Checking ☐ Internet Banking *	☐ Freedom Checking☐ Bill Payer*	☐ Reward Checking * ☐ VISA Debit Card	
have not been notified that	, I certify (1) that the number shown It I am subject to backup withholding withholding, and (3) I am a U.S. pers	g as a result of failure to report a on (including a U.S. resident ali	all interest or dividends, or the en).	e Internal Revenue Service (IR		
	,	SHARE DRAF	I AGREEME	: N I		
(b) The Credit Union i share draft and tra undersigned is the (c) The Credit Union n share draft. (d) When paid, share (e) Except for neglige (f) Any objection resp	lanks (and other methods) approved s under no obligation to pay a share nsfer shares to this Account in the an n eligible to withdraw shares. nay pay a share draft on whatever da drafts become the property of the Conce, the Credit Union is not liable fo ecting any item shown on a periodic d or received electronically.	draft that exceeds the fully paid mount of the resulting overdraft ay it is presented for payment, n redit Union and will not be retur r any action it takes regarding th	I and collected share balance , plus a service charge, from a otwithstanding the date (or a ned either with the periodic si ne payment or nonpayment of	in this Account. The Credit Un any other regular share account my other limitation on the time tatement of this Account or ot a share draft.	nt from which any of the of payment) appearing on the herwise.	
	a or received encoded	FREE eST	ATEMENTS			
Credit Union will mail information to third p	ent – I elect to obtain my MidWest An I me a paper account statement at a Parties, excluding credit union affiliar ive eStatements. I will receive paper	merica Federal Credit Union acc iny time, upon request (a fee ma tes, concerning my account.	ount information online only (•		
	N	MEMBERSHIP	AGREEMEN	IT		
authorize the Credit Union Union now or in the future Rate Schedule, and Funds If a Debit Card, ATM card, the Electronic Services Ag	reby make application for membersl to obtain information about me for and agree that the Credit Union may s Availability Policy and disclosures a Internet Banking, Phone Banking, B reement and Disclosure. If my accou e unpaid balance. I certify that the in	nip in and agree to conform to the purposes of granting credit. y change those terms and condicapplicable to the accounts and sill Payer or Electronic Fund Tranunt is placed for collections, in a	ne Bylaws and any Amendmei I/we also agree to the terms tions from time to time. I/we services requested herein will sfer service is requested and ddition to any unpaid balanc	nts thereof in the MidWest Am and conditions of any accoun acknowledge that a of a copy be provided at a reasonable t provided, I/we agree to the te e, I/we will be responsible for	t that I/we have in the Credit of the Truth in Savings Disclosure, time after the account is establishe erms of and acknowledge receipt of	
The Internal Revenue S	ervice does not require your con	sent to any provisions of this	document other than the	certifications required to a	avoid backup withholding.	
Member Signature <i>x</i>			Date			
Consent of Spouse (to be of Mexico, Texas, Washington	completed in community property st n, and Wisconsin.)	ates if joint owner is other than	spouse of member. These sta	tes include: Arizona, Californi	a, Idaho, Louisiana, Nevada, New	
Approved and consented t	io:			Date		

Add Joint O	wner #1 (Please	send a copy of two (2) forms of q	ualifying identification: Driver's		
Last Name		First Name		Approval Code	
		City			
Mailing Address if different					-
Home Phone					
Date of Birth Soc. S					
Employer				Work Phone	
		-		WOIKT HOHE	
		Data lagu		leguanea	Evniros on
		Date Issued Place of			•
Joint owner has access to the following:		Date Issued Place o		issuance	Expires on
	-	* Disciosure Required * * Aj.	pilcation Required		
	Phone Banking/PIN * Liquid Gold	☐ Kids Club Savings ☐ Overdraft Loan ** ☐	☐ Advantage Checking☐ Internet Banking *	☐ Freedom Checking ☐ Bill Payer*	☐ Reward Checking * ☐ VISA Debit Card
		send a copy of two (2) forms of q	ualifying identification: Driver's		
Last Name			First Name		ode M.I
Street Address <i>required</i>		City		State	Zip
		City			
		Email Address			
				Mother's Maiden Name	
Employer				Work Phone	
		Date Issue		Issuance	Expires on
I.D. Document #2 I.D. #					·
		Disclosure Required ** App			
	Phone Banking/PIN * Liquid Gold	☐ Kids Club Savings ☐ Overdraft Loan ** ☐	☐ Advantage Checking ☐ Internet Banking *	☐ Freedom Checking ☐ Bill Payer*	☐ Reward Checking * ☐ VISA Debit Card
	LOINT ON	VNER AGREEMI	ENT (NOT TRA	NSEEDADIE)	
account. The joint owners of thi all of said joint owners to thei withdrawal or receipt of any of owners also agree to the terms this account as collateral secu	It Union is hereby authorize is account hereby agree with redit as such joint owner them, and payment to any of and conditions of the accounity to a loan or loans from	ed to recognize any of the sign each other and with said credits with all accumulations there if them or the survivor or survivor as established by the credit unter credit union. The right or a edit union, which shall not affect	atures subscribed below in the tunion that all sums now paid on, are and shall be owned by rs shall be valid and discharge nion from time to time. Any or a uthority of the credit union uno	e payment of funds or the tra on shares, or heretofore or he y them jointly, with right of s said credit union from any li ill of said joint owners may ple der this agreement shall not l	reafter paid in on shares by an urvivorship and be subject to ability for such payment. The ju edge all or any part of the share toe changed or terminated by s
Joint Owner #1 Signature x				Date:	
Joint Owner #2 Signature <i>x</i>				Date:	
		NATION OF BE			
		hereby	_		
		Date o			
-		Date o			
				Date:	
Witness x					