

## **Application & Account Agreement**

## What you will need to join America's Christian Credit Union:

- Government issued ID/Driver's License/State ID or Passport
- Your complete physical and mailing address
- Social Security Number
- Date of Birth

**IMPORTANT INFORMATION ABOUT 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.

For the best and fastest experience possible, as a part of your membership application for verification purposes, please unfreeze/unblock your credit with any credit agencies. By not unblocking your credit before submitting this application may cause delays in the process.

Select Your Account:							
Promo Code							
High Yield Savings (Min. \$10,000)	Regular Share/Savings		☐ Mone	☐ Money Market			
Christmas Club (Max. \$20,000)	☐ Vacation Club (Max. \$20,000)		☐ IRA Sh	are			
Secure Checking with Overdraft Line of Credit (LOC) Requested LOC amount \$ I choose to decline an Overdraft LOC Debit card Issue checks	with Over Requ I choo	■ Basic Checking with Overdraft Line of Credit (LOC) ■ Requested LOC amount \$ ■ I choose to decline an Overdraft ■ Debit card ■ Issue checks		Term Share Certificate (Min. \$1,000) Term  IRA Term Share Certificate (Min. \$500) Term			
Account Signer(s):							
Account Ownership:							
Primary Member:							
Date of Birth:/	SSN/TIN:	Household In	Household Income: \$				
Signer #2:							
Date of Birth:/							
Change of Address/Telephone Number:  Please check if you are an existing member and your address/phone number has changed.  Please complete a new Personal Profile to update your information.							
Designation of Transfer on Death Beneficiary: (For additional beneficiaries, please complete another Account Agreement form)							
Beneficiary #1:		Relationship:		Percentage:			
Address (no P.O. Box):							
City:		State:	ZIP:	Phone:			
Beneficiary #2:		Relationship:		Percentage:			
Address (no P.O. Box):							
City:		State:	ZIP:	Phone:			

Overdrait Protection						
Transfer Overdraft Protection (TOP) is an optional service that helps you avoid overdrafts and returned items on your checking account by using the funds from another account for overdraft protection. Subject to the provisions of the Terms and Conditions, if any action taken with regard to your checking account results in the account becoming overdrawn, you can authorize ACCU to make a transfer from another account, in the order specified, together with any related fees by listing the accounts below: (a Visa credit card may not be used for TOP)						
1.	2.	3.	4.			
W-9 Request for Taxpayer Identification Number and Certification (Primary member's name and tax identification number will be used for tax reporting)						
By signing below, I certify under penalties of perjury that:						
(1) the Taxpayer Identification Number (TIN)/Social Security Number shown on this form is my correct TIN; (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding (and have written "Exempt" after my TIN on the TIN blank), or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has informed me that I am no longer subject to backup withholding; and (3) I am a U.S. person (including a U.S. resident alien). FATCA reporting does not apply.						
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. The Internal Revenue Service does not require your consent to any provision of this document other than certifications required to avoid backup withholding.						
Primary Member's Signature:	Date:/					
Agreement and Authorization:						
By signing below, I/we hereby apply for membership with America's Christian Credit Union (ACCU) or certify I/we are existing members and agree that the account(s) and/or services shall be governed by the terms and conditions set forth herein the Credit Union's Disclosure(s), with which I/we have been provided and I/we agree to conform to the bylaws and amendments thereof. All signers authorize this Credit Union to make inquiries from any consumer reporting agency, including a check protection service, in connection with this account. I/we understand that membership is contingent on satisfactory account verification. I/we understand that joint account owners will have the same privileges as the primary account owner. I/we agree that I/we will have the option of opening additional accounts verbally or electronically unless stated otherwise in writing. Under penalty of perjury, I/we certify that the information provided on this form is true, correct, and complete.						
Primary Member:	Date:/					
Joint Signer (if applicable):	Date:/					
	This area is for cred	dit union use only				
Member #:	ACCT #:	ACCT #:	ACCT #:			
Approved by:	Title:		Date:/			
Disclosures are provided to the member, in person, when the account is opened or mailed if the member is not present.  Truth in Savings Disclosure Funds Availability Policy Consumer Fee Schedule Check 21 Substitute Check Policy Disclosure						
☐ Electronic Fund Transfer Disclosure and Agreement ☐ Privacy Disclosures						