

US Federal Credit Union Membership and Account Application

Please print and sign below.

Please read and select the following options below, if applicable, before completing the remainder of the application.

Package Choice

- Amplified Package
- Preferred Package
- First Step Package (age 17 and under)
- Share Savings Only

Type of Service

- New Membership
- Add Co-Applicant
- Name Change
- Other: _____

Membership Eligibility

- I Live Work Worship Volunteer Attend school Have an eligible relative
(check one)
in the Greater Twin Cities* Northfield Community.
(check one)
*Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington Counties.
- Or** I live with someone who is eligible by any of the above criteria.

Added Services

- I request to be enrolled in Internet BranchSM and ExpressFoneSM
- I request to be enrolled in MEMBERS Prime Club

Member Number (Office Use Only)

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 opening an account. When you open an account at US Federal Credit Union, 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 information.

Primary Member Information

First name _____		Middle _____		Last _____	
Social Security # / Taxpayer ID # _____			Date of birth _____		
Address _____					
City _____	State _____	Zip _____	DL/State ID# _____		
Home phone _____			Other phone _____		
Email _____					
Monthly Mortgage/Rent _____		Years at current address _____			
Employer's name _____		Employer's phone _____		Years at job _____	
* Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.					
Gross annual income _____		Other income* _____			
Source of other income _____		Mother's maiden name (For security purposes only) _____			

Co-Applicant Information Complete only if co-applicant is desired or required

First name _____		Middle _____		Last _____	
Social Security # / Taxpayer ID # _____			Date of birth _____		
Address _____					
City _____	State _____	Zip _____	DL/State ID# _____		
Home phone _____			Other phone _____		
Email _____					
Monthly Mortgage/Rent _____		Years at current address _____			
Employer's name _____		Employer's phone _____		Years at job _____	
* Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.					
Gross annual income _____		Other income* _____			
Source of other income _____		Mother's maiden name (For security purposes only) _____			

Note: Please read and complete the following section. By signing below I/we hereby certify that all information contained in this application is true and accurate to the best of my/our knowledge. I/we agree to have the credit union pull a credit report and check employment history as allowed by law to determine if I/we qualify for other services in addition to opening a Share Savings account. I/We agree to the terms and conditions governing all US Federal Credit Union accounts and are bound by all service and account disclosures that pertain to the services selected. I/we acknowledge receipt of and agree to the terms and conditions of the Membership Agreement and Account Disclosures and to any amendment the credit union makes from time to time which are incorporated herein.

Instructions to the Signer: Certification Instruction. Cross out item 2 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. Cross out item 3 and complete a W-8 BEN if you are not a U.S. Person. CERTIFICATION AS TO TAX PAYER IDENTIFICATION NUMBER AND BACKUP WITHHOLDING. Under penalties of perjury, I certify that: 1) The number shown on this form is my correct tax payer identification number. 2) I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest and dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and 3) I am a U.S. person including a U.S. resident alien.

Note: The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

X

Applicant Signature (Required)

Date

X

Co-Applicant Signature (If Applicable)

Date

Application Checklist:

- Copy of government issued ID(s)
- \$5 minimum deposit for share savings account (required)*
- \$20 minimum deposit for checking account*

*Check or Money order only – payable to US Federal Credit Union

Please return completed Membership and Account Application, along with applicable deposits and forms to any branch location, or mail to:

US Federal Credit Union
Attn: Member Service Center
1400 Riverwood Drive
Burnsville, MN 55337