

Credit Union

Member No.

CREDIT UNION MEMBERSHIP APPLICATION

Applicant

Phone

Address

City

State

Zip

The above person or entity hereby applies for membership in and if accepted agrees to conform to the bylaws and any amendments thereto of the above named Credit Union.

Date of Birth

Taxpayer Identification No.

Driver's License No. or I.D.

State

Issued

City/State of Birth

Security Code

Email

Employer

Phone

Employer Address

City

State

Zip

X

Signature of Applicant (or Authorized Person)

Title

Date

Verification of Membership Eligibility (For credit union use only)

Individual's basis for membership:

- Resides within community.
- Employed within community.
- Employee of sponsor / SEG: _____
- Member of organization listed in FOM: _____
- Member of immediate family of qualified person: _____
- Other: _____

Organization/Association's basis for membership:

- Majority of directors, owners, or members eligible for membership.
- Business location within geographic limits of CU field of membership.
- Public depositor (governmental unit).
- Other: _____

Membership Application: Approved, Rejected (specify reason):

BY: X

CU Signature

Title

Date

