

## Membership Application

To apply for membership with HEW Federal Credit Union, please complete the information below and return it to the Credit Union along with your initial deposit of a \$5.00 membership fee per member as noted in the Share Account Agreement and Disclosure, and a copy of 2 forms of identification.

**Primary Member Information:**

ACCOUNT NUMBER:

**Please Print**

|   |                                   |                             |
|---|-----------------------------------|-----------------------------|
| <b>Name: Last M.I. First</b>              |                                   | <b>Date of Birth</b>        |
| <b>Address Street &amp; Number</b>        |                                   | <b>Home Phone</b>           |
| <b>Zip City State</b>                     |                                   | <b>Work Phone</b>           |
| <b>I.D/License Number</b>                 | <b>Social Security Number/TIN</b> | <b>Previous HEW Account</b> |
| <b>Employer Agency</b>                    | <b>Position/Title</b>             | <b>Home Email Address</b>   |
| <b>How did you find out about HEWFCU?</b> |                                   | <b>Work Email Address</b>   |

**Please check the HEWFCU Services you desire:**

- Share Savings Account ~ Suffix 0
- Share Draft/Checking Account ~ Suffix 9
  - With Share Draft Overdraft Protection
- Holiday Savings Share Account ~ Suffix 7  
*Funds transferred will be to your regular Share Account (Suffix 0) in early November*
- Money Management Share Draft Account ~ Suffix 6
- PAL (For Access to Your Account via Touch-tone Telephone)
- ATM Card  
Would You Like:
  - One ATM Card
  - Two ATM Cards (2nd for Joint Member)
- VISA Check Card (Point Of Sale Card/Debit Card)  
Would You Like:
  - One Check Card
  - Two Check cards (2nd for Joint Member)
- Online Banking

**Joint Owner Information/Please Print**

|  |                                   |                             |
|--|-----------------------------------|-----------------------------|
| <b>Name: Last M.I. First</b>             |                                   | <b>Date of Birth</b>        |
| <b>Address Street &amp; Number</b>       |                                   | <b>Home Phone</b>           |
| <b>Zip City State</b>                    |                                   | <b>Work Phone</b>           |
| <b>I.D/License Number</b>                | <b>Social Security Number/Tin</b> | <b>Previous HEW Account</b> |
| <b>Employer Agency</b>                   | <b>Position/Title</b>             | <b>Home Email Address</b>   |
| <b>How did you find out about HEWFCU</b> |                                   | <b>Work Email Address</b>   |

**Sponsoring Member Information**

|  |  |
|--|--|
| <b>Name</b>                                  |  |
| <b>Sponsoring Member's Account Number</b>    |  |
| <b>Relationship to Sponsored Member</b>      |  |
| <b>Sponsoring Member's Home Phone Number</b> | <b>Sponsoring Member's Work Phone Number</b> |

By signing below, I certify, in accordance with the IRS W-9 instructions provided by HEW Federal Credit Union and under penalties of perjury, that the Social Security Number (SSN) taxpayer identification number (TIN) shown is my/the correct identification number. Below I have designated my tax withholding status.

I am not subject to backup withholding as a result of a failure to report all dividends of interest, or because the IRS has notified me that I am no longer subject to backup withholding.

I am subject to backup withholding     Exempt     I am not a United States Citizen (complete W-8)

I hereby authorize HEWFCU to open a Share Savings Account for me. By signing below, I agree to the terms and conditions of the Share Savings account and other account agreements for services I have indicated on the reverse side of this application, in addition to the terms and conditions of Truth-in-Savings, Rate and Fee Schedule, Funds Availability Policy Disclosure and any amendments HEWFCU may make from time to time which are incorporated in the Agreement & Disclosure Package. By signing below, I give HEWFCU permission to determine my credit worthiness for this account and authorize the Credit Union to obtain a copy of my credit file. If approved, I may have to complete an application prior to accessing the Share Draft Overdraft Protection Line. When applicable, I authorize HEWFCU to make use of the email addresses listed on the front of the Combined Application. I acknowledge receipt of a copy of the agreements and disclosures applicable to the account and services requested on the reverse side. The Internal Revenue Service does not require you consent to any provision of this document other than the certifications to avoid backup withholding.

Primary Member's Signature

Date

Joint Owner's Signature

Date

**FOR OFFICIAL USE ONLY**

Membership Request:

Approved     Denied     With Exception \_\_\_\_\_

Membership Officer \_\_\_\_\_

Date \_\_\_\_\_

Chex Systems Called    Date \_\_\_\_\_

No Record

**Primary Owner's Thumb Print:**

**Joint Owner's Thumb Print:**

**ATM Number:**