

ACCOUNT AGREEMENT AND MEMBERSHIP APPLICATION



Office Use Only

Social Security Number/Taxpayer I.D. _____

Account Number _____

I/We am/are applying for membership in **VALLEY FIRST CREDIT UNION**. My application includes the request to open the following accounts/services subject to the terms of the Master Account Disclosure and any other service disclosures which are incorporated by reference.

Primary Owner Name (please print) _____ Employer _____
 () ()

Home Phone _____ Work Phone _____ Driver's License # / State _____ Birthdate _____

E-Mail Address _____

Current Street Address _____

City _____ State _____ Zip _____

Mailing Address (If different from above) _____

City _____ State _____ Zip _____

Mother's Maiden Name _____

Joint Owner Name (please print) _____ Mother's Maiden Name _____

Joint Owner's Address _____

Driver's License # / State _____ Joint Owner's Social Security Number _____ Birthdate _____

An early closure fee of \$25 will be imposed to all accounts that are closed within the first six months of opening.

I am aware of the early closure fee that is imposed if my account is closed within the first six months of its original opening. I also understand that an account disclosure will be mailed to me upon account opening.

I am eligible for membership with Valley First Credit Union, because I:

Am employed with _____
 an employer / group which is specifically listed in the credit unions field of membership

X _____
OR
 Live Regularly work Regularly worship Attend school
 Stanislaus County San Joaquin County

OR
 Am an immediate relative of a member

Please continue on reverse side. Your signature is required.

Designation of Beneficiary

The following beneficiary(ies) is/are to receive the proceeds of my account at my death. If this is a joint account, the beneficiary is to receive it only after both owners die. If there is more than one beneficiary and any beneficiary does not survive the account owners, the surviving beneficiaries are to share the deceased beneficiary's interest according to the stated percentages.

Name _____ Address _____ %

Name _____ Address _____ %

Name _____ Address _____ %

Product/Service Information Request

I would like to request applications/information on the following services:

- | | | |
|---|---|---|
| <input type="checkbox"/> Checking Account | <input type="checkbox"/> IRA / Share Certificates | <input type="checkbox"/> Direct Deposit / Payroll Deduction |
| <input type="checkbox"/> Check / ATM Cards | <input type="checkbox"/> Credit Cards | <input type="checkbox"/> Online Services |
| <input type="checkbox"/> Overdraft Protection | <input type="checkbox"/> Consumer / Real Estate Loans | <input type="checkbox"/> Other _____ |

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I hereby make application for membership in, and agree to conform to the By-Laws (as amended) of Valley First Credit Union which is authorized to recognize any of the signatures below in the payment of funds or the transaction of any business on this account. The parties to this account agreement agree with each other and with the Credit Union that all shares in this account shall be owned as follows:

- Individual Account** - This account or certificate is owned by the named party. Upon the death of that party, ownership passes to the named pay-on-death payee(s)
- Joint Account** - This account or certificate is owned by the named parties. Upon the death of any of them, ownership passes to the survivor(s). Upon the death of all of them, ownership passes to the named pay-on-death payee(s).

The owner(s) of this account agree with each other and with the Credit Union that all shares and all accumulations thereon are subject to the withdrawal or receipt by any of the owners, and payment to any of them shall be valid and discharge the credit union from any liability for such payments. All funds in an account remain subject to liens, security interests, rights of set off and charges notwithstanding the source of the contribution. Any or all of the owners may pledge all or any part of the shares in this account as security for a loan or loans. The right or authority of the Credit Union under this agreement shall not be changed or terminated by the owners, or any of them except by written notice to the Credit Union, which written notice shall not affect transactions previously made. Shares are not transferable except on the books of the Credit Union. All parties to this account agreement shall keep the Credit Union informed of any change(s) in their address(es). The Credit Union makes credit available to its members on a regular basis. I/We authorize the Credit Union to obtain credit reports in connection with future credit opportunities.

I certify under penalties of perjury, that I am a U.S. person, that the taxpayer's ID/Social Security Number given to the credit union on this application as required by the Internal Revenue Service is correct, and that I have not received a notice from the IRS of under reporting of dividends or interest, nor am I subject to back-up withholding unless indicated below. The Social Security Number of the Primary Owner will be used for reporting tax information to required government agencies.

I am subject to IRS-ordered back-up withholding. Initial _____

Primary Owner's Signature	Date
X	

Joint Owner's Signature	Date
O	

Joint Owner's Signature	Date
O	

Joint Owner's Signature	Date
O	