

MILLBURY - AUBURN - WORCESTER - SOUTH GRAFTON

## **General Information**

Prime Owner's Name				
First:	Middle:	L	ast:	
Social Security Number:		(no spac	es or dashes)	
Date of Birth:	(1	month day year - n	o spaces, dashes,	or slashes) (i.e.
mmddyy)				
O Male				
O Female				
Drivers License #				
ADDRESS:				
Number and Street:		Apt#		
City/Town:	Sta	te: 🗸 Zip:		
Daytime Phone:		Evening Phone:		
Email:				
Number of years residing in thi	s state:			
Joint Owner's Name				
First:	Middle:	L	ast:	
Social Security Number:		(no spac	es or dashes)	
Date of Birth:	(1	month day year - n	o spaces, dashes,	or slashes) (i.e.
mmddyy)		*		
☐ Male				
Female				
Drivers License #				
ADDDECC.				
ADDRESS:				_
Number and Street: City/Town:	Stat	Apt#		
Daytime Phone:	Sta	Evening Phone:		
Email:		_ Everling Friorie.		
Number of years residing in thi	s state:			
realist of years residing in the	o state.			
Account # (if MCU Member)				

Membership, Accounts, and Services

PLEASE SIGN ME UP FOR...

☐ Membership/Primary Savings (\$25 minimum - REQUIRED FOR MEMBERSHIP)
Partnership Checking - includes MCU ATM Card
I would like the following information as stated above printed on my checks:
Name
☐ Joint Owner's name
Address
Phone #
Other
I would like the JOINT OWNER listed above on:
☐ ALL Accounts
☐ Primary Savings
☐ Checking
Please make all checks payable to Millbury Federal Credit Union
Enclosed is a check for \$ Please deposit into:
Savings (\$25 min.) \$ Checking \$

## **Authorization and Agreement**

Signing below constitutes an Agreement to conform to the Credit Union's bylaws and the terms and conditions of the Truth-in-Savings Disclosure and Account Agreements and the Electronic Services Disclosure and Agreements, which are incorporated by this reference, whether applicable to products and services I am currently requesting, or request in the future. I may obtain a copy of these disclosures at a MCU branch. These disclosures will be mailed to me by MCU once my account has been opened. If I, the Prime Owner, am under 17 years of age, I understand that I must have a parent or guardian of legal age as Joint Owner on any checking accounts I have with MCU. I authorize you to gather whatever credit, checking account, and employment information you consider appropriate from time to time. I understand that this offer is based in part on MCU's review of my credit standing.

## Taxpayer Identification Number (TIN) Certification and Backup Withholding Information

If the account is in more than one name, see the chart in the Truth-in-Savings Disclosure and Account Agreements for guidelines on whose number to enter. Typically, this will be the Prime Owner's Social Security Number.

## Taxpayer Identification Number (TIN)

I agree to enter my TIN in the appropriate box. For individuals, this is my Social Security number (SSN). For most entities, it is my Employer Identification number (EIN). If I do not have a number, I will refer to the "How To Get a TIN" section in the Truth-in-Savings Disclosure and Account Agreements.

Taxpayer I.D. # (Social Security or Employer I.D.):
Payee Exempt From Backup Witholding (see Part III Instructions in Truth-in-Savings Disclosure and Account Agreements).
Certification
Under penalties of perjury, I certify that: (1) The information provided on this form is true, correct, and complete; and (2) I am not subject to backup withholding.
I agree to cross out number (2) above and check the box below if I have been notified by the IRS that I am currently subject to backup withholding because of underreporting interest or dividends on my tax return. ( $\square$ IRS Notification)
The IRS does not require your consent to any of the provisions of this document other than the certification required to avoid backup withholding.
X
Prime Owner's Signature and Certification Date
X
Joint Owner's Signature Date
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Be sure to sign the form before mailing.