## PRINTING CREDIT UNION

5800 S. EASTERN AVE. \* SUITE 250 \* LOS ANGELES, CA 90040-4021 4333 DRANGE ST. \* SUITE 100 \* RIVERSIDE, CA 92501

## **MEMBERSHIP APPLICATION**

ACCOUNT NUMBER

-				
ELIGIBILITY  Unanalizable to inic District to Automic City	harry Par (alarm harb and and and	4		
I'm eligible to join Printing Industries CU	because 1 m (piease check one). subject		Oing a Nam Assault	
Employee/Employer of		Important Information About Procedures for Opening a New Account 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 who opens an account. What this means for Me: When I open an account, you wil ask for my name, address, date of birth, and other information that will allow you to identify me. You may also ask to see my driver's license or other identifying documents.		
Relative of who is a member already of Printing Industries CU				
Relative Account No		Relationship		
MEMBER INFORMAT	ION Places complete entire form	check boxes for services requested and sign	a at hottom	
Primary Owner Name	Flease complete entire form,	Joint Owner Name	i at bottom.	
Home Street Address	Years ☐ Own ☐ Rent☐ Live with Family	Home Street Address	Years ☐ Own ☐ Rer☐ Live with Fa	
City	State Zip	City	State Zip	
Previous Address City	State Zip	Previous Address City	State Zip	
Date of Birth Social Security No.	Drivers License No./ID No.	Date of Birth Social Security No.	Drivers License No./ID No.	
Mother's Maiden Name Home Phone (	Cell Phone E-Mail Address	Mother's Maiden Name Home Phone Cell ( ) (	Phone E-Mail Address	
Employer Occupation	Work Phone	Employer Occupation	Work Phone	
Pay-On-Death: In the event of my death, or if to receive all sums in my/our account establish		unt, the death of all the owners, I/we hereby designate	ate as my/our Pay-On-Death paye	
Name of Pay-On Death Payee	Phone No.	Name of Pay-On Death Payee	Phone No.	
Address	SS#/DOB	Address	SS#/DOB	
Premium Checking Account (\$25.00 mi (must complete Section 4 below)  IRA Share Account (\$50.00 minimum of Looney Tunes Kids Club Account (\$5.00 minimum of Looney Tunes Kids Club Accoun	inimum deposit):		\$	
□ Holiday Club Account:				
☐ Master Money Debit Card ☐ Addition	nal Card for Joint Owner (must have C	TOTAL ENCLOSED Checking Account)	\$	
4 CHECKING ACCOUNT OV	ERDRAFT OPTIONS			
Overdrafts are covered by a transfer from n to credit approval.	ny savings or line of credit account, with	n not more than three transfers in any calendar m	onth. Line of credit account subj	
Savings Only Line of Credit Only First from Savings then Line of Credit First from Line of Credit then Savings No Overdraft				
5 SOCIAL SECURITY NO. /				
because: (a) I am exempt from backup with of a failure to report all interest or dividends, resident alien).	nolding, or (b) I have not been notified by , or (c) the IRS has notified me that I am	correct tax payer identification number; (2) I am y the Internal Revenue Service (IRS) that I am sub no longer subject to backup withholding, and (3) I	oject backup withholdings are re am a U.S. person (including a U	
Instructions: Cross out item 2 above if I have to on your tax return. Cross out item 3 and con		ntly subject to backup withholding because you faile person.	ed to report all interest and divide	
6 ACKNOWLEDGEMENT &	SIGNATURE			
I hereby make application for membership in and	d agree to be bound by the bylaws, regulation Agreement, Truth-in-Savings Disclosure	ns, policies and rules, and any amendments thereof, of and Agreement, and the Fee Schedule and agree to be of the Agreement on the reverse	Printing Industries CU. I acknowle be bound by their terms. My signa	
	• 1	this document other than the certifications require	red to avoid backup withholdin	
X		X		
Primary Owner Signature	Date	Joint Owner Signature	Date	

## **AGREEMENT**

In this Membership Application, "I", "Me" and "My" mean each and every person who signs on the reverse. "You" and "Your" mean Printing Industries Credit Union. If I am not currently a member, I hereby make application for membership. I agree to conform to your bylaws as well as all applicable terms and conditions set forth in the Truth-in-Savings Disclosure, the Certificate Account Agreement and Disclosure (if applicable), and Electronic Services Disclosure and Agreement (receipt of all of which is hereby acknowledged and which is incorporated by this reference). I authorize you to open other account(s) for me in person or per my telephone request.

I authorize you to gather whatever credit, checking account and employment information you consider appropriate from time to time. I understand that this will assist, for example, in determining my initial and ongoing eligibility for an account. I authorize you to give information concerning your experience with me to others. I understand and agree that you may retain this Membership Application and any other information you may receive.

**SECURITY INTEREST:** Each and every owner of the account(s) shall be jointly and severally liable for any and all losses and damages to the Credit Union occasioned by any owner. Further, each and every owner pledges as collateral for any loss or damage suffered by the Credit Union all funds on deposit (except funds held in IRAs) with the Credit Union along with any other collateral pledged either currently or in the future for any loan, and if the owner's have or will have from the Credit Union. This pledge of collateral is meant to secure the payment of all debts and obligations each owner owes to the Credit Union either currently or in the future. However, this cross collateral provision does not apply to any loan secured by any owner's principle residence or any other real property that an owner now owns or may hereafter acquire. In the event any owner does not repay his/her debt, obligation or loss, all owners authorize the Credit Union to apply, without notice, any and all such shares or deposits to the debt, obligation or loss and/or obtain possession of the collateral, sell same pursuant to applicable law and apply the proceeds to the debt, obligation or loss.

GENERAL PLEDGE OR SHARES AND DEPOSITS: I pledge all paid shares and deposits and payments thereon, which I now have or hereafter may have with you to the extent of all unpaid balances due you. In case of default, I hereby authorize you to apply any and all such funds to the payment of the unpaid balances. However, I retain full access to any and all shares on deposit not specifically pledged as collateral. No lien or right to impress a lien on shares and deposits shall apply to any of my shares which may be held in an "Individual Retirement Account" (IRA).

**SIGNATURE VERIFICATION:** DRIVER'S LICENSE OR I.D. CARDS: IMPORTANT: For verification of signatures only, all applicants (Primary & Joint) must attach a photocopy of a current and valid driver's license, California or Arizona identification card, out-of-state driver's license, out-of-state identification card or military identification. All I.D.'s must contain a photograph.





FOR CREDIT UN	ION USE ONLY
VERIFICATION OF ID (PRIMARY OWNER	R):
☐ Documentary Method Used	
Type of Document:	
ID No.:	
Date of Issuance:	Expiration Date:
☐ Name as it appears on I.D.:	
ID Verified By (Print Name):	
Title:	
Signature: X	Date
☐ FINCEN ☐ OFAC	24.0
Application Approved By (Print Name):	
Title:	
Signature: X	
	Date
FOR CREDIT UN	ION USE ONLY
VERIFICATION OF ID (JOINT OWNER):	
☐ Documentary Method Used	
Type of Document:	
ID No.:	
Date of Issuance:	Expiration Date:
Name as it appears on I.D.:	

ID Verified By (Print Name): \_\_\_

☐ FINCEN ☐ OFAC

Application Approved By (Print Name): \_\_\_\_

Title:

Signature: X \_

Signature: X \_

FOR CREDIT UNION USE ONLY				
	OPENED / ORDERED BY	DATE		
MEMBERSHIP SHARE				
SECONDARY SHARE				
PREMIUM CHECKING				
CHEXSYSTEMS				
INITIAL ORDER				
IRA SHARE				
LOONEY TUNES				
☐ DEBIT CARD				
SECOND CARD				