



# Membership Application

Account Number \_\_\_\_\_ - \_\_\_\_\_  
 Branch/MSR \_\_\_\_\_ / \_\_\_\_\_

### Primary Member

Eligibility:  Employer  Prime Time Welcome Letter  
 Relative (Name/relationship)

\_\_\_\_\_  
 Name (Last, First, Middle)  
 \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_-\_\_\_\_  
 Birth Date Social Security Number  
 State # \_\_\_\_\_  
 Driver's License Number/State ID# Expiration Date

\_\_\_\_\_  
 Physical Street Address (other than PO Box) City State Zip  
 Own?  Rent?  Yrs \_\_\_\_ Mos \_\_\_\_ Time at Present Address

\_\_\_\_\_  
 Mailing Address City State Zip  
 (\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_ (\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_  
 Home Phone Cell Phone  
 (\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_  
 Work Phone E-mail

\_\_\_\_\_  
 Employer Start Date  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 Position/Occupation Annual Salary "Code Word"  
 US Citizen \_\_\_\_\_ National Origin \_\_\_\_\_

**Multiple Owner Accounts** An account owned by two or more persons is a multiple owner account. All multiple accounts are joint accounts with rights of survivorship and not as Tenants in Common. Upon the death of an owner, that person's interest will pass to the surviving owner(s). For more than one Multiple Owner, complete **Account Owner Addendum**.

\_\_\_\_\_  
 Name (Last, First, Middle)  
 \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_-\_\_\_\_  
 Birth Date Social Security Number  
 State # \_\_\_\_\_  
 Driver's License Number/State ID# Expiration Date

\_\_\_\_\_  
 Physical Street Address (other than PO Box) City State Zip  
 Own?  Rent?  Yrs \_\_\_\_ Mos \_\_\_\_ Time at Present Address

\_\_\_\_\_  
 Mailing Address City State Zip  
 (\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_ (\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_  
 Home Phone Cell Phone  
 (\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_  
 Work Phone E-mail

\_\_\_\_\_  
 Employer Start Date  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 Position/Occupation Annual Salary "Code Word"  
 US Citizen \_\_\_\_\_ National Origin \_\_\_\_\_

### Taxpayer Identification Number

#### TIN Certification and Backup Withholding Information

Under penalties of perjury, I certify that: The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me) and 2. I am not subject to backup withholding because (a) I am exempt from backup withholding or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of failure to report all interest or dividends or (c) the IRS has notified me that I am no longer subject to backup withholding and 3. I am a US person (including a US resident alien). If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8. Certification Instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

TIN \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

X \_\_\_\_\_  
 Signature of US Person

### Payable on Death/Designation of a Beneficiary

At death of the last surviving party, ownership passes to the following designated pay-on-death beneficiaries and is not part of the last surviving party's estate.

\_\_\_\_\_  
 1 Beneficiary Name (Last, First, Middle) Date of Birth

\_\_\_\_\_  
 Address Social Security Number

\_\_\_\_\_  
 2 Beneficiary Name (Last, First, Middle) Date of Birth

\_\_\_\_\_  
 Address Social Security Number

I/We hereby make application of membership in the Tampa Bay Federal Credit Union and Agree: a) to conform to its bylaws and amendments, b) to subscribe to a share (savings) account adhering to balance requirements, c) I/We expressly agree that the account is subject to the payment of fees adopted and amended by the Credit Union, and d) if joint owners are on this account, all sub-accounts, including Certificate Accounts opened under the Primary Account Number will be owned by the same owners of the Primary Account, unless designated by a separate Account Owner Addendum or classification. I further certify that I am in Tampa Bay Federal Credit Union's field of membership. By signing below, we agree to the terms and conditions of the Universal Account Agreement which includes Truth-in-Savings Disclosures (including the Rate Bulletin and Fee Schedule) and to any agreements the Credit Union makes from time to time which are incorporated herein. We acknowledge receipt of a copy of the Universal Account Agreement and Disclosures applicable to the accounts and service requested here in. If an access card or EFT service is requested and provided, we agree to the terms and acknowledge Receipt of the Electronic Funds Availability Disclosures. By signing below, the Credit Union is authorized to obtain a credit report, check my credit and employment history. We understand you may contact me for further information and that this application must be completed fully for Tampa Bay Federal Credit Union to process my request. The Credit Union may obtain information from others about me and give credit information to others. A negative credit history may disqualify me from services. 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 you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We will also ask to see your driver's license or other identifying documents.

X \_\_\_\_\_  
 Member Signature\* Date

X \_\_\_\_\_  
 Joint Owner Signature Date

\*For applications processed via the mail, please have signature notarized and provide a copy of a **unexpired driver's license and social security card**.