

CentralAlliance CREDIT UNION MEMBERSHIP APPLICATION

I/We hereby apply for a single/joint Account at CentralAlliance Credit Union and agree to conform to the by-laws and amendments thereto.

PLEASE PRINT

ACCOUNT # _____

LAST NAME _____ FIRST _____ MI _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

SS# _____ CELL PHONE # _____

HOME PHONE _____ WORK PHONE _____

MOTHER'S MAIDEN NAME _____ BIRTH DATE _____

EMAIL ADDRESS _____

JOINT INFORMATION

LAST NAME _____ FIRST _____ MI _____

SS# _____ CELL PHONE _____

BIRTH DATE _____ RELATIONSHIP _____
SPOUSE, CHILD, PARENT, OTHER

This account is being opened for personal household purposes only. _____ Yes _____ No
This is not a business account.

TAX WITHHOLDING CERTIFICATION

Tax Withholding Certification: Under penalties of perjury, I certify (1) that the social security number shown on this form is my correct social security number and (2) that I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends or the Internal Revenue Service has notified me that I am no longer subject to backup withholding. *

*Strike part (2) of this paragraph if you have notified that you are subject to backup withholding due to underreporting and have not received a notice from the Internal Revenue Service that backup withholding has terminated.

THIS IS A SINGLE ACCOUNT _____ THIS IS A JOINT ACCOUNT _____

PRIMARY MEMBER SIGNATURE _____

JOINT MEMBER SIGNATURE _____

SINGLE ACCOUNT

I understand that payment of any withdrawal shall be subject to the bylaws and amendments thereto of the credit union, and restrictions or limitations imposed by applicable law, and any right which the credit union may have to amounts now or hereafter credited to such account to the payment of any indebtedness which I now have or may have then have to the credit union.

I further understand that monies deposited in this account earn dividends as determined by policy of the board of directors. This account is nontransferable.

JOINT ACCOUNT

We understand that any sums in the joint account may be withdrawn or pledged as security upon the request of (all) (any one) of the parties hereto, without regard to whether any other party is under legal disability or is deceased at the time payment is requested. Such payment shall, however, be subject to the bylaws and amendments thereto of the credit union, any restrictions or limitations imposed by applicable law, and any right which the credit union may have to apply amounts now or hereafter credited to such account to the payment of any indebtedness which we now have or may then have to the credit union. In the event of the death of any of the undersigned, the survivor(s) hereby agree(s) to indemnify such credit union for any tax payable under Section 72.29 of the Wisconsin Statutes. This account is nontransferable.

IF YOURS IS A COMMUNITY PROPERTY STATE: and you select single account, it shall be (solely-held) or if you select a joint account, it is not a MARITAL ACCOUNT.

ACCOUNT APPROVED

DATE OF APPROVAL _____

MEMBERSHIP OFFICER _____