

# Membership Application

Name \_\_\_\_\_

SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home # \_\_\_\_\_

Work # \_\_\_\_\_

Work Location \_\_\_\_\_

Joint Owner Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ NJ \_\_\_\_\_ Zip \_\_\_\_\_

Home # \_\_\_\_\_

Work # \_\_\_\_\_

**Primary Owner Signature** \_\_\_\_\_

**Joint Owner Signature** \_\_\_\_\_

**Certification-** Under Penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer ID number or I am waiting for a number to be issued to me. AND
2. I am not subject to backup withholding either because I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the IRS has notified me that I am no longer subject to backup withholding ( does not apply to real estate transaction, mortgage interest paid, the acquisition or abandonment of secured property, contributes to an individual retirement account (IRA), and payments other than interest and dividends)
3. I authorize the credit union to obtain a copy of my credit report:

**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 of underreporting interest or dividends on your tax return.

I have read and understand all disclosures.

I hereby make application for membership in the credit union named below and agree to conform to its bylaws and amendments thereof, copies of which have been made available to me, and to subscribe for at least one share.

By signing this card you authorize the credit union to obtain credit reports in connection with this application for membership services and or credit and for update renewal or extension of the credit received if applicable. If you request the credit union will tell you the name and address of any bureau from which it received a credit report on you.

The Internal Revenue Service does not require your consent to any provision of the document other than the certifications required to avoid backup withholding.

L'Oreal USA Federal Credit Union is hereby authorized to recognize any of the signature subscribe in the payment of funds or the transaction of any business for this account. The joint owner of this account here by agree with each other and said credit union that all sums now paid on shares, or heretofore or here thereon, are and shall be owned by them jointly, with right of survivorship and be subject to withdrawal or receipt, of any of them or the survivor or survivors shall be valid and discharge said credit union from any liability for such payment. The joint owners also agree to the terms and conditions of the accounts as established by the credit union from time to time.

Any or all of said joint owners may pledge all or any part of the shares in this account as collateral security to a changed or terminated by said owners, or any of them expect by written notice to said credit which shall not affect transitions theretofore made.

## Home Banking & E Statements Via the Internet

*Visit us at: [lorealusafcu.com](http://lorealusafcu.com)*

Now you can have complete access to your account over the Internet.

Check balances, view cleared checks, deposits, withdrawals, view your statement, check current loan rates, access our loan calculator, apply for a loan, order checks, Money Desktop, Text Banking Bill Pay, etc. We also have text alerts available so you can be notified by email or text to your cell phone of deposits, cleared checks or any item the clears through your account and ALL FREE!

We are happy to help. 732-499-6679.

Name \_\_\_\_\_

Location dept/ floor \_\_\_\_\_

**Personal** Email address \_\_\_\_\_

Account Number (**Not your SS#**) \_\_\_\_\_

Debit/ATM Card PIN # \_\_\_\_\_

If ordering a Debit/ATM card record your 4 digit numeric PIN.

Numeric Password For Home Banking\*\* \_\_\_\_\_

Signature \_\_\_\_\_

\*\*Password Number can be 6-8 characters **numeric ONLY**

**Please include a copy of a Government Issued Identification**