

Junior Varsity Club & Varsity Club Membership Application

Please provide minor's information.					
First Name		Last Name			MI
Social Security #/Tax ID	Date of Birth (MM DD YYYY)	Mother's Maiden (Last) Name			Gender M F
Home Address (No P.O. Boxes)		City	State	ZIP	
Mailing Address (If Different)		City	State	ZIP	
Employer (If Applicable)		Occupation (If Applicable)			
ID Type	Issued By	ID #	ID Issue Date (MM DD YYYY)	ID Expiration Date (MM DD YYYY)	
Email (Personal)		Mobile Phone (123 456 7890)		By providing us with your cell phone number, you are providing us with express consent to contact you at this number, including through the use of an automated dialing system.	

Please provide parent/legal guardian joint owner's information.					
First Name		Last Name			MI
Social Security #/Tax ID	Date of Birth (MM DD YYYY)	Mother's Maiden (Last) Name			Gender M F
Home Address (No P.O. Boxes)		City	State	ZIP	
Mailing Address (If Different)		City	State	ZIP	
Employer		Occupation			
Driver's License #			ID State	ID Issue Date (MM DD YYYY)	ID Expiration Date (MM DD YYYY)
Email (Personal)		Mobile Phone (123 456 7890)		By providing us with your cell phone number, you are providing us with express consent to contact you at this number, including through the use of an automated dialing system.	

Please provide the following information to confirm eligibility.		
Family Member Name	Relationship	Family Member Account # (Optional)

Select the products you would like to get your Membership started.			
Share Savings¹	<input checked="" type="checkbox"/> Yes	Parent/legal guardian joint owner required on all shares. 1. \$5 minimum deposit required to establish and maintain Membership. Eligibility subject to verification. 2. Limit one College Saver Share Certificate per minor. Available only on Varsity Club and Junior Varsity Club accounts. \$200 minimum opening deposit. Early withdrawal/account closure subject to penalty. Fees may reduce earnings on the account. 3. Only ATM deposits allowed for Junior Varsity Club accounts. 4. Youth Debit Share and Youth Debit Mastercard available to Members age 13-17 with a valid ID and email address. Youth Debit Share requires: 1. a parent/legal guardian to be a joint owner within all shares on the Membership and 2. a \$25 minimum deposit to open the Youth Debit Share. eStatements and eNotices included. Subject to ChexSystems review.	
College Saver² Share Certificate	Yes No		
ATM Card³	Yes No		
Minor	Yes No		
Parent/Legal Guardian	Yes No		
Youth Debit Mastercard⁴ with a Youth Debit Share⁴	Yes No		
Minor	Yes No		
Parent/Legal Guardian	Yes No		

Please read this important information about your account.

Membership Disclosure: I, the account holder, certify that I am eligible and hereby apply for Membership to SchoolsFirst Federal Credit Union. I acknowledge that the SchoolsFirst FCU Disclosure & Agreement of Terms and Conditions will be sent to me upon the opening of my account. I agree to be bound by its terms and by the Credit Union bylaws or any amendments thereof. In addition to my signature below, my use of the account will confirm my agreement. I agree that all the information given to SchoolsFirst FCU is true and correct. I authorize the Credit Union to obtain consumer reports in connection with the account and with any future credit opportunities.

Please read this important information about opening a new account.

Under the USA Patriot Act, all financial institutions are required to obtain, verify and record information that identifies each person who opens an account. Therefore, when you open an account at SchoolsFirst FCU, we will ask for your name, address, date of birth and other identifying information. We may also ask to see your driver's license or other form of identification.

Certification: Under penalties of perjury, I certify that: **1. The number shown on this form is my correct taxpayer identification number, and 2. I am not subject to backup withholding due to failure to report all interest and dividends, and 3. I am a U.S. person, and 4. I am exempt from Foreign Account Tax Compliance Act (FATCA) reporting.**


Instructions: Cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding due to failure to report interest and dividend income. Cross out item 3 above and complete a W-8 BEN if you are not a U.S. person. Cross out item 4 above and complete a W-9 if you are subject to FATCA.

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

Minor's Signature _____ Date _____
 If the minor is too young to sign, a parent/legal guardian should sign on their behalf, such as "Susie Smith, a minor, by Mary Smith, parent"

Parent/Legal Guardian Joint Owner's Signature _____ Date _____

- Checklist**
- Fill out this application.
 - Sign the application. For non-Member parent/legal guardian, please have your signature notarized and provide a copy of the notary's acknowledgment.
 - Include a legible copy of the parent/legal guardian's driver's license.
 - Enclose a \$5 check or money order made payable to the minor to cover the initial \$5 share deposit to open the Membership.
 - Include an additional \$25 check or money order made payable to the minor and a copy of the minor's photo identification to open a Youth Debit Mastercard with a Youth Debit Share.
 - Mail everything to: SchoolsFirst FCU, Attn: Membership Development, P.O. Box 11547, Santa Ana, CA 92711-1547

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For more information, please call (800) 462-8328 or visit us online at schoolsfirstfcu.org.

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