

# VISA APPLICATION & MEMBERSHIP INVITATION



## 1. MEMBERSHIP

Are you an existing ACCU member? If yes, please complete sections 2,3 & 4 only. ACCU Member # \_\_\_\_\_  
If you are not already a member, please complete the entire application.

## 2. PRIMARY APPLICANT

Limit Requested (\$5,000 Min.) \_\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address (No P.O. Box) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Cell (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Driver's License# \_\_\_\_\_ State \_\_\_\_\_

Check box to give ACCU your consent to call your cell phone.

E-mail Address \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_


Employer \_\_\_\_\_ Years \_\_\_\_\_ Occupation \_\_\_\_\_

Gross Annual Household Income† \$ \_\_\_\_\_ Monthly Mortgage/Rent Payment \$ \_\_\_\_\_

†Alimony, child support, or separate maintenance income need not be revealed if you do not wish it to be considered as a basis for repaying this obligation.

## BALANCE TRANSFER

YES, I want to make a balance transfer \_\_\_\_\_ (Credit Card Issuer) \_\_\_\_\_ (Account Number) \$ \_\_\_\_\_ (Minimum \$500 Transfer)

 If you have more than two balance transfers please attach the additional information to this application.

\_\_\_\_\_ (Credit Card Issuer) \_\_\_\_\_ (Account Number) \$ \_\_\_\_\_ (Minimum \$500 Transfer)

Mailing Address (If different from above) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

## JOINT APPLICANT (Married applicants may apply for a credit card in their own name)

Name \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address (No P.O. Box) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Cell (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Driver's License# \_\_\_\_\_ State \_\_\_\_\_

Check box to give ACCU your consent to call your cell phone.

E-mail Address \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_

Employer \_\_\_\_\_ Years \_\_\_\_\_ Occupation \_\_\_\_\_

Gross Annual Household Income† \$ \_\_\_\_\_

†Alimony, child support, or separate maintenance income need not be revealed if you do not wish it to be considered as a basis for repaying this obligation.

Authorized user: If you wish to add an authorized user, please check this box and we will send you a form to complete.

## 3. CARD PROTECTION

### Are You Interested In Having Your Visa Card Protected? Yes or No

If something were to happen to you or you became disabled through a sudden illness or accident, debt protection can help. America's Christian CU offers debt protection on the Visa Signature card, allowing you the opportunity to protect yourself and your family. To receive more information on debt protection, check the box below and a member representative will contact you upon application processing.

## 4. SIGNATURES & CERTIFICATIONS

By signing below, the undersigned has applied for a Visa Signature card with America's Christian Credit Union; agrees to its by-laws and the terms and conditions of any approved account, as amended from time to time; and authorizes the credit union to verify credit and employment history by any necessary means, including preparation of a credit report by a credit reporting agency. The undersigned certifies that the information provided on this Application is true and correct, and that the terms on the Application applies to all accounts held by the undersigned at this credit union. If approved, ACCU will have a security interest in all shares, dividends on shares, and deposits (excluding IRA shares) which you now have or hereafter may have in this credit union.

Primary Signature X \_\_\_\_\_ Date \_\_\_\_\_

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

Additional Signature X \_\_\_\_\_ Date \_\_\_\_\_

## 5. ELIGIBILITY (New Members Only)

**IMPORTANT ACCOUNT OPENING INFORMATION:** Like all credit unions, we're required to have eligibility guidelines covering who can join us (also called our "field of membership"). You may be eligible through your affiliation with a church, ministry, or school that is in alignment with the Wesleyan Christian Doctrine, or as an immediate family member living in the home of an ACCU member.

NEW MEMBER (One time \$2 membership fee) ➔ Please include a "Check" or "Money Order" with this application. Make check payable to ACCU.

**\*Photocopies of the driver's license for each signer on the account are also required with paper application.**

I am a:  Regular Attendee  Student/Alumnus  Employee  Other \_\_\_\_\_

Immediate Family member living in ACCU member's home - Member's Name: \_\_\_\_\_

Of a (Church/School/Ministry): \_\_\_\_\_

Denomination \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

How did you first hear about ACCU: \_\_\_\_\_

Backup Withholding Certifications—Check box A only if true or Box B. Write in the appropriate TIN/SSN. - Primary TIN/SSN \_\_\_\_\_

A.  By signing below, I certify under penalties of perjury that (1) the Taxpayer Identification Number (TIN) shown on this form is my correct TIN, and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding (and have written "Exempt" after my TIN on the TIN blank), or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has informed me that I am no longer subject to backup withholding. I am a U.S. person (including a U.S. resident alien). (Note: You must cross out Item 2 above if the IRS has notified you that you are subject to backup withholding because of underreporting of interest or dividends.)

Primary Signature \_\_\_\_\_

B.  A separate certification has been completed

## 6. ADDITIONAL PRODUCTS & SERVICES

### I'm Interested! Please contact me for the following:

Savings Account  Free Checking  Investments  Loans  Other \_\_\_\_\_