

Last Name First Name Account #



Master Account Agreement /Signature Card

I/We am/are applying for membership with Eagle Credit Union. My/Our application includes the request to open the following accounts subject to the terms of the Master Account Disclosure and any other service disclosures which are incorporate by reference.

( ) Regular Savings ( ) Simple Checking ( ) MY Account ( ) Other:

The Account shall be: ( ) Individual ( ) Joint ( ) Other:

Eligibility for Membership:

Primary Member Information:

Primary Owner Name (please print)
Street Address City Zip
Home Phone Work Phone
Driver's License # Birth date
Social Security # Mother's Maiden Name
E-Mail Address Occupation
Signature Date

Joint Owner #1 Information:

Full Name (please print)
Street Address City Zip
Home Phone Work Phone
Driver's License # Birth date
Social Security # Mother's Maiden Name
E-Mail Address Occupation
Signature Date

Joint Owner #2 Information:

Full Name (please print)
Street Address City Zip
Home Phone Work Phone
Driver's License # Birth date
Social Security # Mother's Maiden Name
E-Mail Address Occupation
Signature Date

Pay-On-Death Designation of Beneficiary

I authorize the following beneficiary designation on those accounts governed by this signature card. I understand these designations will remain in effect until revised in writing.

Table with 4 columns: Name of Payee, Address, DOB, %

Spousal Consent (if applicable)

Checking Overdraft Protection

I authorize the credit union to pay overdrafts (including visa check card transactions, and point-of-sale transactions, if applicable, credit transactions, electronic check and ACH transactions, but not ATM transactions) on my checking account by an automatic transfer of funds from my:

- [ ] Savings (Share) Account ID(s):
[ ] Visa Line of Credit
[ ] Both. Please indicate from which account first:
[ ] Both. Please indicate from which account first:

Account Agreement

In this Signature Card, "I", "we", and "our" mean each and every person who signs the card. "You" and "your" mean Eagle Credit Union. If I am/we are not currently a member, I/we hereby make application for membership with Eagle Credit Union. I/we understand that upon approval, I/we will be issued a Visa Debit Card (if opening a checking account) and given access to the Eagle Credit Union audio response system. I/we agree to conform to you bylaws as well as all applicable term and conditions set forth in the Account Agreement and Truth in Savings Disclosure, the Term Share Certificate Disclosure and Agreement (if applicable) and Electronic Funds Transfer Agreement and Disclosure Statement (receipt of all of which is hereby acknowledged and which is incorporated by this reference). I/we understand and agree that this Signature Card shall govern the Regular Savings, the Checking Account, the Visa Debit Card, and Eagle Credit Union audio response service and other accounts designated herein. I/we authorize you to open other account(s) for me/us in person or per my telephone request.

By signing below, I/we authorize Eagle Credit Union to gather checking account and employment information deemed appropriate from time to time. I/we also authorize you to do an independent credit review and obtain credit reports now and in the future. ECU also has the right to furnish other credit reporting services with information about my/our credit, as well as information concerning you experience with us to others. I/we understand and agree that you may retain this Signature Card and other information you may receive and that I/we waive our rights to confidentiality of our records with the California Department of Motor Vehicles (DMV) and authorize you to obtain such information from the DMV. I/we understand that this will assist, for example, in determining our initial and ongoing eligibility for an account.

Taxpayer Identification Number

Under the penalties of perjury, I certify that:

- 1. 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 a failure to report all interest or dividends, or the IRS has notified me that I am no longer subject to backup withholdings; and
3. I am a U.S. person (including a U.S. resident alien).

Certification Instruction: 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 or dividends on your tax return.

Signature Date

CREDIT UNION USE ONLY

ChexSystem: OFAC
Social Search ID Verification
Opened By: Verified By:



