

FLORIDA RURAL ELECTRIC CREDIT UNION MEMBERSHIP AND ACCOUNT AGREEMENT

MEMBER INFORMATION:

Member Name: _____

Member #: _____

SSN/TIN: _____

Date of Birth: _____

Physical Address: _____

Mailing Address: _____

Home Phone: (____) _____ Work Phone: (____) _____

Type of I.D.: _____ I.D. No.: _____

Employer: _____

Occupation: _____

Email Address: _____ Place of Birth: _____

Mother's Maiden Name (MMN): _____

Credit Union Membership Eligibility: _____

Membership Approved By: _____, Membership Officer, (Date): _____

Credit Union Representative: _____

JOINT OWNER/TRUSTEE INFORMATION:

Name: _____

SSN/TIN: _____

Date of Birth: _____

Physical Address: _____

Mailing Address: _____

Home Phone: (____) _____ Work Phone: (____) _____

Type of I.D.: _____ I.D. No.: _____

Employer: _____

Occupation: _____

Email Address: _____ Place of Birth: _____

ACCOUNT OWNERSHIP:

Individual Joint with Rights of Survivorship

PAY-ON-DEATH BENEFICIARY DESIGNATIONS:

Name: _____ Name: _____

Relationship: _____ Relationship: _____

Physical Address: _____ Physical Address: _____

SSN: _____ SSN: _____

Date of Birth: _____ Date of Birth: _____

Trust IRA FUTMA - Successor Custodian: _____

SSN: _____ DOB: _____

ACCOUNT TYPE:

Membership Share/Savings

Special Share/Savings

Christmas Share/Savings

Differentia Share Draft/Checking

IRA Accumulation Share

Share Draft/Checking

Certificate of Deposit # _____ Initial Term _____ months

Certificate of Deposit # _____ Initial Term _____ months

IRA Certificate of Deposit # _____ Initial Term _____ months

IRA Certificate of Deposit # _____ Initial Term _____ months

ADDITIONAL SERVICES REQUESTED: [check all requested services]

ATM Card

VISA Check Card

TellerLine Audio Response

Anywhere Banking

IRS CERTIFICATION:

UNDER PENALTY OF PERJURY, YOU CERTIFY (1) THAT THE SSN/TIN NUMBER SHOWN ON THIS FORM IS YOUR CORRECT TAXPAYER IDENTIFICATION NUMBER (OR YOU ARE WAITING FOR A NUMBER TO BE ISSUED TO YOU); (2) YOU ARE NOT SUBJECT TO BACKUP WITHHOLDING BECAUSE (A) YOU ARE EXEMPT FROM BACKUP WITHHOLDING OR (B) YOU HAVE NOT BEEN NOTIFIED BY THE IRS THAT YOU ARE SUBJECT TO BACKUP WITHHOLDING AS A RESULT OF A FAILURE TO REPORT ALL INTEREST OR DIVIDENDS, OR (C) THE IRS HAS NOTIFIED YOU THAT YOU ARE NO LONGER SUBJECT TO BACKUP WITHHOLDING; AND (3) YOU ARE A U.S. PERSON (INCLUDING A RESIDENT ALIEN).

x _____

Signature

Date

Print type name

By signing below, you hereby apply for membership in **Florida Rural Electric Credit Union** and acknowledge receipt of and agree to the Master Agreement, the Shares, Savings and Deposit Rates Chart, the Fee Schedule and all other documents provided to you by the Credit Union as amended by the Credit Union from time to time. You also agree that the Credit Union may, in its sole discretion, provide to you any account, product or service pursuant to your instructions, whether written, verbal or electronic. All accounts, products and services shall be subject to the Master Agreement, the Shares, Savings and Deposit Rates Chart, the Fee Schedule and all other documents provided to you by the Credit Union as amended by the Credit Union from time to time.

Unless otherwise designated in a writing accepted by the Credit Union, the ownership and agency designations herein shall apply to all accounts under the member number set forth herein except as otherwise provided in the Master Agreement.

x _____

Signature

Date

Owner Trustee
 As Custodian for Minor under
Uniform Transfers to Minors Act

Print name

x _____

Signature

Date

Owner Trustee

Print name

x _____

Signature

Date

Owner Trustee

Print name