

PERSONAL INFORMATION

PLEASE PRINT CLEARLY

OWNER	SAVINGS DEDUCTION \$
ACCOUNT NUMBER	SOC. SEC. NO
STREET ADDRESS	
CITY - STATE - ZIP	
HOME PHONE	CELL PHONE
DATE and PLACE OF BIRTH	
YOUR EMAIL	MOTHER'S MAIDEN NAME

JOINT OWNER	
ACCOUNT NUMBER	SOC. SEC. NO
STREET ADDRESS	
CITY - STATE - ZIP	
HOME PHONE	CELL PHONE
DATE and PLACE OF BIRTH	
YOUR EMAIL	MOTHER'S MAIDEN NAME

CERTIFICATION AS TO TAX PAYER IDENTIFICATION AND BACKUP WITHHOLDING

By signing this card, I certify, under penalties of perjury, that (1) I am a U.S. Person (including a U.S. resident alien), (2) the Social Security number (SSN)/taxpayer identification number (TIN) shown is my/the correct identification number and (3) I am NOT, unless designated below, subject to backup withholding as a result of a failure to report all dividends or interest, or because the IRS has notified me that I am no longer subject to backup withholding. The IRS does not require your consent to any provision of the Account Card other than the certifications required to avoid backup withholding.

I am a US Person (including a US resident Alien) I am NOT a United States citizen or U.S. Person
(complete form W-8BEN at <http://www.irs.gov/pub/irs-pdf/fw8ben.pdf>).

FOR CREDIT UNION USE ONLY

1. Identity Verification (Unexpired Government Issued Picture I.D.) Type: _____
Expiration Date: _____ Number: _____
2. Identity Verification Type: _____
Expiration Date: _____ Number: _____ Taken By: _____
Membership Eligibility _____ Approved By _____ Date _____
Opened By _____ Date _____ Approved By _____ Date _____
OFAC Match No Match

SIGNATURES:

(a) My/Our Signatures as affixed below acknowledge our acceptance of all terms and conditions of Membership including CERTIFICATION AS TO TAX PAYER IDENTIFICATION and BACKUP WITHHOLDING. b) NEGATIVE REPORTING: The credit union may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

I/We hereby make Application for Membership in the ALPHA CREDIT UNION and agree to the Rules, Regulations, and By-Laws of the Credit Union, those now in force and any which may hereafter be adopted. Each signer agrees that the Credit Union may obtain any credit reference necessary. I/We also agree to the regulations governing use of a negotiable report from third parties, including credit reporting agencies, to verify your eligibility for any account or services you request. I/We therefore subscribe for at least one share and, under penalties of perjury, I/We certify that the information on this Application is true, correct, and complete. (See Reverse Side)

ACCOUNT SERVICES: SHARE SAVINGS CHECKING with Overdraft Transfer Available ATM/DEBIT CARD ONLINE BANKING / Bill Pay Service Available CLUB ACCOUNT SHARE MONEY MARKET IRA

LAST NAME _____ FIRST _____ INITIAL _____ PRIMARY MEMBER

ALPHA CREDIT UNION - APPLICATION FOR MEMBERSHIP

JOINT SHARE ACCOUNT AGREEMENT - NOT TRANSFERABLE (If Applicable)

The Credit Union is hereby authorized to recognize any of the signatures subscribed on this card in the payment of funds or the transaction of any business for this account. The joint owners agree with each other and with said credit union that all sums now paid in on shares, or heretofore or thereafter paid in on shares by any or all of said owners to their credit as such joint owners with all accumulations thereon, are and shall be owned by them jointly, with right of survivorship and be subject to the withdrawal or receipt of any of them, and payment to 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 account as established by the credit union from time to time. Any and all of said joint owners may pledge all or any part of the shares in this account as collateral security to a loan or loans from the credit union. The right of authority of the credit union under this agreement shall not be changed or terminated by said owners, or any of them except by written notice to said credit union which shall not affect transactions theretofore made.

SHARE DRAFT AGREEMENT WITH OVERDRAFT TRANSFER CLAUSE

I / We hereby authorize the credit union to establish this Share Draft Checking Account for me/us. The credit union is authorized to pay checks signed by me (or by any of us) and to charge all such payments against the shares in this Account. It is further agreed that: (a) Only over-the-counter blanks and other methods approved by the credit union may be used to make withdrawals from this Account. (b) The Credit Union is under no obligation to pay a check that exceeds the fully paid and collected share balance in the Account. The Credit Union may, however, pay such a check and transfer shares to this Account in the amount of the resulting overdraft. (c) The Credit Union may pay a check on whatever day it is presented for payment, notwithstanding the date or any limitation on the time of payment, unless the member has previously provided written timely notification to the Credit Union of a post dating. (d) When paid, checks become the property of the Credit Union and will not be returned either with the periodic statement of the Account or otherwise. (e) Except for negligence, the Credit Union is not liable for any action it takes regarding payment or nonpayment of a check. (f) Any objection respecting any time shown on a periodic statement of this Account is waived unless made in writing to the Credit Union before the end of 60 days after the statement is mailed. (g) This Account is subject to the Credit Union's right to require advance notice of withdrawal, as provided in its bylaws. (h) This Account is also subject to such other terms, conditions and service charges (if applicable) as the Credit Union may establish from time to time. (i) If this Agreement is signed by more than one person, the persons signing below shall be the joint owners of this Account which, in that event, shall be subject to any and all additional terms and conditions. NOTICE: As part of your membership process, you will receive a Truth In Savings Disclosure and a Funds Availability Policy. Your signature on this card represents your understanding and agreement to all terms and conditions of the Membership Application and Certification of Backup Withholding, those now in force and any which may hereafter be adopted.

USA PATRIOT ACT

In accordance with Section 326 of the USA Patriot Act, you authorize us to verify and record information that identifies each person who opens an account. You further authorize us to check your account, credit, and employment history, and obtain a credit report from third parties, including credit reporting agencies, to verify your eligibility for any account or services you request. We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report. I/We therefore subscribe for at least one share and, under penalties of perjury, I/We certify that the information on this Application is true, correct, and complete.