

Joining Members First

Since 1969 Members First of Maryland Federal Credit Union has been providing low cost financial services to our members.

To join Members First you must live, work, or attend church in the White Marsh, Perry Hall, Nottingham, Rosedale, and Fullerton communities, or belong to one of our SEGs (select employee groups). Visit our website at www.mfirstcu.org for a complete list of membership eligibility options.

You can establish your account with Members First with as little as \$5.00, and once you are a member you are eligible to take advantage of all the other products and services offered by the Credit Union. Please call or stop by our office today to find out how you can become a member.

We'd love to have you bank with us!



Perry Hall Square Shopping Center

4371 Ebenezer Road

Perry Hall, Maryland 21234

410.931.3123



Baltimore Office

535 Dundalk Avenue

Baltimore, Maryland 21224

410.633.8850



www.mfirstcu.org



Membership Application

Yes! I'd like to join Members First Credit Union by opening a Share Savings Account.

Initial deposit made by:

- Payroll Deduction/Direct Deposit
- Cash
- Check or Money Order

Eligibility:

I am eligible for membership through my:

- Employer/Volunteer Organization

Name of Organization
- Family Member

Family Member's Name

Type of Account Ownership:

- Single Party
- Joint Account with Survivorship
- Payable Upon Death (POD)

Primary Owner Information:

Name _____
First MI Last

Street Address _____
(Please provide residential address, not P.O. Box.)

City/State/Zip _____

Mailing Address _____
(if different from street address)

City/State/Zip _____

Social Security No. _____

Driver's License No. _____
(Indicate state of issuance, number and expiration date.)

Home Phone _____

Employer _____

Work Phone _____

E-mail Address (if applicable) _____

Date of Birth _____ Mother's Maiden Name _____
(DD/MM/YY)

TIN Certification:

Under penalty of perjury, I certify that:

- I AM subject to back-up withholding
- I AM NOT subject to back-up 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 (c) the IRS has notified me that I am no longer subject to backup withholding, and (3) I am a U.S. person (including a U.S. resident alien). If you are not a U.S. person, complete form W-8 BEN, available from the IRS.

Primary Owner Signature _____

Date _____

Joint Owner Information and Share Agreement

Members First Credit Union is hereby authorized to recognize any of the signatures subscribed hereto in the payment of funds or the transaction of any business for this account. The joint owners of this account hereby agree with each other and with said Credit Union that all sums now paid in on shares, or heretofore or hereafter paid in on shares, by any or all of said joint 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. Any or all said joint owners may pledge all or any part of the shares in this account as collateral security to a loan or loans. The right or 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.

Name _____
First MI Last

Street Address _____
(Please provide residential address, not P.O. Box.)

City/State/Zip _____

Mailing Address _____
(if different from street address)

City/State/Zip _____

Social Security No. _____

Driver's License No. _____
(Please include issued date and expiration date. Needed for Patriot Act.)

Home Phone _____

Employer _____

Work Phone _____

E-mail Address (if applicable) _____

Date of Birth _____ Mother's Maiden Name _____
(DD/MM/YY)

The USA Patriot Act requires verification of identity.

Membership Application

continued

Payable on Death Beneficiary (if you selected POD ownership)

Name _____
First MI Last

Street Address _____
(Please provide residential address, not P.O. Box.)

City/State/Zip _____

Home Phone _____

By signing below, I/we agree to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Rate and Fee Schedule, Funds Availability Policy Disclosure, if applicable, and to any amendment the Credit Union makes from time to time which are incorporated herein. I/we acknowledge receipt of a copy of the Agreement and Disclosures applicable to the accounts and services requested herein. If an ATM card or EFT service is requested and provided, I/we agree to the terms of and acknowledge receipt of the Electronic Funds Transfer Agreement. (If you are in default on a financial obligation to us, federal law gives us the right to apply the balance of shares and dividends in your account at the time of default to satisfy that obligation. Once you are in default we may exercise that right without further notice to you.) I certify that I am eligible for membership because of my aforementioned relationship to a family member, employer or volunteer organization. I authorize the Credit Union to check my accounts, credit and employment history, and to obtain a credit report from third parties, including credit reporting agencies, to verify my eligibility for any accounts or services I have requested.

Primary Owner _____

Date _____

Joint Owner _____

Date _____

I WOULD LIKE TO OPEN:

- Checking account
- Savings club account
- IRA
- Share Certificate

How to Join

Fill out the attached membership form and either bring it to the credit union or mail it to us, along with a check for your initial deposit (at least \$5) and a copy of your U.S. state-issued driver's license, state-issued ID card, Military ID, U.S. passport or other government-issued ID that shows nationality or residence, and has a photograph. If you're eligible for membership in our organization through work, include a copy of your work ID or pay stub. If you're eligible because of volunteer work, please include documentation from the group you volunteer for.

After we have all of the above, we'll open your account and send you more information on our services.

