



MEMBERSHIP APPLICATION

MEMBER #

PRIMARY MEMBER INFORMATION

Name:	Social security number:	Date of Birth:
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Street address:	City:	State:	Zip:
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Mailing address, if different than physical address:	City:	State:	Zip:
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Home phone:	Cell phone:	Business phone:
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Email address:

Driver License#:	Mother's Maiden Name:	Security Password:
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Current Occupation:	Current Employer:
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How did you hear about us?	How do you qualify?
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ACCOUNTS/SERVICES REQUESTED

Savings	Checking	Debit	Checks
Certificate	Money Market	Online Banking	Line of Credit
Wire Transfers	Auto Loan	Credit Card	Personal Loan
Pay People	Remote Deposit	Account to Account transfer	Mortgage
Estatements	Mobile Banking	Bill Pay	
Anticipated cash deposit per week:	0 - \$1,000	\$1,001 - \$10,000	Over \$10,000
Anticipated cash withdrawals per week:	0 - \$,1000	\$1,001 - \$10,000	Over \$10,000

Notes:

OWNERSHIP OF ACCOUNT

Select one ownership type and, if applicable, include a beneficiary in the appropriate section of this application. The ownership type and designation specified on this document will remain the same for account listed above.

Individual:       Joint with Survivorship (and not as tenants in common):

As custodian for minor under the Massachusetts Uniform Transfer to Minor Act (UTMA):

WIRE TRANSFERS

I will  or will not  be requesting wire transfers on the accounts included in this membership. If yes, continue reading the information below.

If yes, how many wire transfers do you plan on doing per week? \_\_\_\_\_

The following security measures will be used by the credit union for the purpose of verifying all wire transfer requests.

**Call Back** - when we receive your wire transfer request, we will confirm the request by calling the person who originated the wire request at a telephone number currently on our system. We will not call back to a number not previously on record. We will only call back for wires over \$1,000.00 or if the request is made via fax.

**Password** - please provide a password to be used to verify wires during the call back. If there is no password on file PRIOR to the request, the wire must be requested in person.

Password selected: \_\_\_\_\_

**JOINT OWNER INFORMATION**

Name:		SSN:		Date of Birth:	
Address:		City:		State:	Zip:
Mailing Address:		City		State:	Zip:
Home Phone:	Cell Phone:		Business Phone:		
Email Address:					
Driver's License #:		Mothers Maiden Name:		Security Password:	
Current Occupation:			Current Employer:		

**JOINT OWNER INFORMATION**

Name:		SSN:		Date of Birth:	
Address:		City:		State:	Zip:
Mailing Address:		City		State:	Zip:
Home Phone:	Cell Phone:		Business Phone:		
Email Address:					
Driver's License #:		Mothers Maiden Name:		Security Password:	
Current Occupation:			Current Employer:		

**JOINT OWNER INFORMATION**

Name:		SSN:		Date of Birth:	
Address:		City:		State:	Zip:
Mailing Address:		City		State:	Zip:
Home Phone:	Cell Phone:		Business Phone:		
Email Address:					
Driver's License #:		Mothers Maiden Name:		Security Password:	
Current Occupation:			Current Employer:		

**JOINT OWNER INFORMATION**

Name:		SSN:		Date of Birth:	
Address:		City:		State:	Zip:
Mailing Address:		City		State:	Zip:
Home Phone:	Cell Phone:		Business Phone:		
Email Address:					
Driver's License #:		Mothers Maiden Name:		Security Password:	
Current Occupation:			Current Employer:		

**BENEFICIARY INFORMATION (ONLY ONE ALLOWED PER MEMBERSHIP)**

Name:			Relationship:		
SSN:			Date of Birth:		
Address:		City:		State:	Zip:
Home Phone:			Cell Phone:		

**TAX CERTIFICATION AND BACKUP WITHHOLDING INFORMATION**

Under penalties of perjury, the undersigned certifies on behalf of the account owner that: (1)The Taxpayer Identification Number (TIN) shown above is the Account Owner's correct TIN and (2) the Account Owner is not subject to backup withholding either because (a) It is exempt from backup withholding, or (b) It has not been notified by the Internal Revenue Service (IRS) that it is subject to backup withholding as a result of a failure to report all interest or dividends or (c) the IRS has notified the Account Owner that it's no longer subject to backup withholding, and (3) The Account Owner is a U.S. Citizen or other U.S. person, and (4) the Account Owner is exempt from FATCA reporting. For Federal tax purposes, the Account Owner is considered a U.S. person if the Account Owner is: an individual who is a U.S citizen or U.S resident alien; a partnership, corporation, company or association created or organized in the United States or under the laws of the United States; an estate (other than foreign estate); or domestic trust (as defined by Regulation section 301.7701-7)or under the laws of the United States; an estate (other than foreign estate); or a domestic trust (as defined in Regulations section 301.7701-7).

**THE IRS DOES NOT REQUIRE YOUR CONSENT TO ANY PROVISION OF THIS DOCUMENT OTHER THAN THE CERTIFICATION REQUIRED TO AVOID BACKUP WITHHOLDING**

**MEMBER SIGNATURE(S)**

By signing below, I/We agree to the conditions of the Important Account Information for Our Members including the Terms and Conditions, Electronic Transfers, Funds Availability and Truth in Savings and to any amendment the credit union makes from time to time which are incorporated herein. I/We acknowledge receipt of the Important Account Information for Our Members applicable to the accounts and services requested herein. If an access card or EFT service is requested and provided, I/We agree to the terms of and acknowledge receipt of the Electronic Funds Transfer Agreement. I/We authorize the credit union to obtain a credit report from a consumer reporting agency.

Signature:	Ownership type:	Date
Signature:	Ownership type:	Date:
Signature:	Ownership type:	Date:
Signature:	Ownership type:	Date:

**FOR CREDIT UNION USE ONLY**

Identification verified by: <input type="checkbox"/> Driver's License <input type="checkbox"/> Notarized License <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Student ID <input type="checkbox"/> Passport <input type="checkbox"/> Military ID	Address verified by: <input type="checkbox"/> Driver's License <input type="checkbox"/> Utility Bill <input type="checkbox"/> Auto Registration <input type="checkbox"/> Copy of Lease <input type="checkbox"/> Property Tax Bill	EFunds: <input type="checkbox"/> N/A <input type="checkbox"/>  Verafin/OFAC: <input type="checkbox"/>	Information verified: <input type="checkbox"/>
Documents provided to member:	Important Account Information Booklet <input type="checkbox"/>	Privacy Notice <input type="checkbox"/>	Rate and Fee Schedule <input type="checkbox"/>
Employee Signature:		Teller #:	Date:
Branch Manager Signature:		Teller #:	Date:



## What You Need to Know about Overdrafts and Overdraft Fees

An overdraft occurs when you do not have enough money in your account to cover a transaction, but we pay it anyway. We can cover your overdrafts in three different ways. You may choose one of the options or a combination of all three (Assurance Pay is always the last form of Overdraft protection):

1. An automatic transfer from your Savings Account - You can authorize us to transfer available funds to cover your overdrafts.

2. Overdraft Line of Credit - You must apply for an Overdraft Line of Credit and approval is based on your creditworthiness. You can apply online at AlignCU.com, visit a branch or call us at 800-942-9575. Please refer to the credit agreement for applicable rates and fees.

3. Assurance Pay - Please refer to the following page for eligibility requirements. This notice explains our overdraft practices.

### ► What are the overdraft practices that come with my account?

We may authorize and pay overdrafts for the following types of transactions:

- Checks and other transactions made using your checking account
- Automatic Bill Payments and Preauthorized Automatic Transfers

We do not authorize and pay overdrafts for the following types of transactions using a linked Savings Account or Assurance Pay:

- ATM transactions
- Everyday debit card transactions

We pay overdrafts at our discretion, which means we do not guarantee that we will authorize and pay any type of transaction. If we do not authorize and pay an overdraft, your transaction will be declined and you will be charged a fee for returning the item.

### ► What fees will I be charged if Align Credit Union pays my overdrafts?

Under our overdraft practices:

- There is a \$5 fee for each automatic transfer from your Savings Account.
- We will charge you a fee up to \$35 each time we pay an overdraft using Assurance Pay (Refer to the Insufficient Fund Fees tiered schedule on the following page).
- We will charge you a fee up to \$35 for a returned item (Refer to the Insufficient Fund Fees tiered schedule on the following page).
- There is no limit on the total fees we can charge you for overdrawing your account.

### ► What if I want Align Credit Union to authorize and pay overdrafts?

Complete the Opt-In notice below by selecting your overdraft option(s). Fax to 978-454-4621 or cut along the dotted line and submit the bottom portion either in person to a branch or mail it to:

Align Credit Union  
PO Box 7008  
Lowell, MA 01852  
Attention: Account Services

You have the right to change or revoke your election at any time by contacting Align Credit Union in writing.

### Opt-In/Opt-Out Notice - Please select up to 3 Overdraft Services

- Link to my Savings Account
- Apply for an Overdraft Line of Credit
- Align Credit Union's Assurance Pay Service
- I do not want any Overdraft Service or N/A

Printed Name: \_\_\_\_\_

Member Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Align Assurance Pay Eligibility Requirements**

Assurance Pay is a service that provides overdraft protection on eligible checking accounts. In order to be eligible, you must be a member in good standing and meet the following requirements:

- Your account must be open for at least 6 months
- You cannot be delinquent on any Credit Union loan
- You cannot have caused the Credit Union any loss
- You cannot have a history of returned deposited items
- You cannot have negative account information on your ChexSystems report

Align Assurance Pay does not cover online or telephone banking transactions.

If you use the service, you agree to bring the account to a positive balance within 30 days of the first transaction that brings the account to a negative balance. All accounts that remain with a negative balance may be closed by the Credit Union and reported to ChexSystems. We reserve the right to suspend or terminate Assurance Pay at any time without prior notice.

### **Transaction Clearing Policy**

When processing items drawn on your account, our policy is to pay them according to the dollar amount. We pay the smallest items first. The order in which items are paid is important if there is not enough money in your account to pay all of the items that are presented. Our payment policy minimizes the number of items that may result in an overdraft or NSF fee. If an item is presented without sufficient funds in your account to pay it, we may, at our discretion, pay the item (creating an overdraft) or return the item (NSF). The amounts of the overdraft and NSF fees are disclosed elsewhere. We encourage you to make careful records and practice good account management. This will help you to avoid writing checks or drafts without sufficient funds and incurring the resulting fees.

### **Insufficient Fund Fees Tiered Schedule (Overdraft/NSF/Uncollected/Assurance Pay)**

*Tiered per calendar year*

Tier 1: First Occurrence

\$25.00

Tier 2: Second and Third Occurrence

\$30.00

Tier 3: Over Three Occurrences

\$35.00