

Williamsport, FA 17701		8-452-0697				
All of the terms, conditions, form of account own	Account nership, account sele	• •	formation indic	ated on t	his card apply	
to all of the accounts listed unless Financial 1st F						
Share/Saving		Vacation Clu	ıb			
Share Draft/Checking Christmas Club						
The account number for each of the accounts list	ted consists of the su	uffix added to the e	end of the Men	nber Num	nber. If this card	
applies to more than one account of the same t		_	for that accour	nt type.		
I/We authorize the Credit Union to make th	•	ent Actions	to the accoun	nt:		
(All field types must be completed that will I			to the accoun	π.		
Joint Owner Information	Add		Change		Remove	
POD/ Trust Beneficiary Account Type/Service	Add Add	\dashv	Change Change		Remove Remove	1
	مصر Application an	d Informatio			Kemove	_
				Membe	r#	
Member/Owner:						
Street:		SSN/TIN:				
City/State/Zip		Drivers Lic#				
Home/Cell#		Date of Birth				
Work Phone:						
·		Employer E-mail	-			
Membership Eligibility Plant Location		E-IIIdii				
Fiant Location	Account	Ownership				
We will hold the credit union harmless for action	s regarding account	access. The remov				
ownership interest including any membership sl ment does not affect obligations on any loan acc	,	s) set forth in the "/	Account type":	section. T	This relinquish-	
Joint Owner		SSN/TIN				
Street		Driver Lic#				
City/State/Zip		Date of Birth	n			
Home/Cell#		Employer				
Work Phone		E-mail				
	Account	Designation				
Payable on Death/Trust Acct	_					
All Accounts	Designate S	Specific Accts				
Beneficiary/POD Payee		•	POD Payee			
Street		Street				
City/State/Zip		City/State/Z				
UTMA/UGMA (as custodian for Transfers/Gifts to Minors Act) Minor's S			(minor) ur	nder the	Uniform	
Transfersy diffs to willions Act, willions 3	Account	Services				
Payroll Deduction/Direct Deposit		Debit Card (with draft/ch	ecking o	nly)	
Constant Broke Nov. (In disease Association	 '	F 64-4			dalar and	
Overdraft Protection (Indicate transfer priority)		E-Statement	ts (must have	emaii ad	aaress)	
Web Banking						
	fication and Ba	ck Withholdi	ing Inform	ation		
Under penalties of perjury, I certify that:						
1. The number shown on this form is my correc 2. I am not subject to backup withholding becau		ition number, and				
a. I am exempt from backup withholdings b. I have not been notified by the IRS that I		un withholding as	a result of faile	ure to re	nort interest	
or dividends			a result of fall	ure to re	port interest	
or c. The IRS has notified me that I am not 3. I am a U.S. citizen or other U.S. resident personal control of the control of			f you are: an ir	ndividual	who is a U.S. Citizer	1
or U.S. resident alien; a partnership, corporation the United States; an estate (other than a foreign						F
for the purpose of federal taxes.			_			
Certification Instruction: Cross out #2 above because you failed to report all interest and div						
anything other than a U.S. person	Authoriz	-4:				
By signing below, I/we agree to the terms and co			int agreement,	Truth-in-	Saving Disclosure,	
Funds Availability Policy, if applicable, and to an	y amendment the Cr	edit Union makes f	from time to ti	me which	are incorporated	
herein. I/we acknowledge receipt of a copy of th requested herein. If an access card or EFT service	-					
receipt of the Electronic Fund Transfers Agreem	ent and Disclosure.	The IRS does not re				
of this document other than the certifications re	equired to avoid back	kup withholding.				
X Signature	Date	X Signature			Dat	e
X		X			540	
Signature	Date	Signature			Dat	.e
EOD CDEDIT HIMON USE ONLY						
FOR CREDIT UNION USE ONLY Date of Membership		Address Ver	rification			
Opened/App'd by						
BOD Approval						