

ACCOUNT NUMBER

APPLICATION FOR MEMBERSHIP AND ACCOUNT AGREEMENT FOR REVOCABLE TRUSTS

**USA PATRIOT ACT DISCLOSURE
IMPORTANT INFORMATION ABOUT PROCEDURES
FOR OPENING A NEW ACCOUNT**

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

PART I: GENERAL TRUST INFORMATION

Name of Trust: _____

Date of Trust Document _____

Established by: _____ Settlor-Trustee (1)
(Print Name)

_____ Settlor-Trustee (2)
(Print Name)

Are any of the Settlor-Trustees **members** of the credit union? YES NO

Are any of the beneficiaries eligible for membership? YES NO

If both answers are no, the trust is ineligible for membership.

Proof of Trust: Trust Document Letter from Settlor-Trustees' Attorney

Name/Address/Telephone Number of Settlor-Trustees' Attorney _____

PART II: MEMBERSHIP INFORMATION FOR TRUST

The _____ Trust

submits this form to the _____

Credit Union for two purposes. **First**, the trust hereby applies for membership in the credit union. **Second**, the trust requests the credit union to open a share/deposit account in the name of the trust listed above.

Name of Settlor-Trustee (1) _____
Address/Phone _____
Type of ID used to verify identity _____
ID No. _____ SSN/TIN* _____
Eligibility based on _____ <small>(If family relationship, specify type of relationship and name of family member.)</small>
Name of Settlor-Trustee (2) _____
Address/Phone _____
Type of ID used to verify identity _____
ID No. _____ SSN/TIN* _____

*Taxpayer Identification Number

CHECK ONE:

Any Settlor-Trustee may sign withdrawals All living Settlor-Trustees must sign withdrawals

Signature of Settlor-Trustee (1) _____ Date _____

Signature of Settlor-Trustee (2) _____ Date _____

Part III: TIN CERTIFICATION AND BACKUP WITHHOLDING INFORMATION

Under penalties of perjury, I certify that: (1) The number shown on this form is my correct taxpayer identification number, **and** (2) I am not subject to backup 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).

Certification instructions: You must cross out item **2** above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. Cross out item **3** and complete a W-8 BEN if you are not a U.S. person.

Signature of Settlor-Trustee (1) _____ Date _____

PART IV: UNLAWFUL INTERNET GAMBLING RESOLUTION

Restricted transactions under the unlawful Internet Gambling Act and its implementing regulation, Regulation GG, are prohibited from being processed through this account or through the member relationship.

I, the undersigned, hereby certify that _____ does/does not engage in any internet gambling transactions.

If the organization does engage in internet gambling transactions, evidence of legal authority to engage in the Internet Gambling business is required, such as: (1) A copy of the organization's license that expressly authorizes the member to engage in the internet gambling business issued by the appropriate state or tribal authority; (2) A "reasoned legal opinion" as defined in Regulation GG, that demonstrates the organization's internet gambling business does not involve restricted transactions; or (3) A third-party certification that the organization's systems for engaging in the internet gambling business are reasonably designed to ensure that the organization's internet gambling business will remain within the licensed or otherwise lawful limits, including with respect to age and location verification.

PART V: SUCCESSOR TRUSTEE INFORMATION

The Successor Trustee is the person who succeeds the Settlor-Trustee(s) upon his/her (their) death, resignation, or inability to act as the Trustee(s). Often a surviving spouse or an adult child will be the Successor Trustee.

If someone presents ID and claims to be the Successor Trustee, the teller should immediately contact the manager/supervisor at the credit union. He/she will make the appropriate decision based on the trust document and consultation with the Settlor-Trustee's and/or the credit union's attorneys, if necessary.

ACKNOWLEDGEMENT

By signing below, I/we acknowledge receipt of the Credit Union's separate account disclosures (listed below), and agree to be bound by all of the terms and conditions of the disclosures and this application, and any amendments thereto, or to those contained in any membership agreement and disclosures provided to me/us at any time, which conditions contained therein are fully incorporated herein. I/we certify that the information on this application is true and correct. I/we understand that this account is established subject to the laws of the State of _____. The Credit Union is authorized to make whatever inquiries it deems necessary of others concerning the information contained in this application, and to provide information arising out of my/our transactions with the Credit Union with consumer reporting agencies.

- Truth in Savings Disclosure
- Funds Availability Policy
- Privacy Policy
- Terms & Conditions of Your Account
- Other: _____

Authorized Representative Signature _____

Authorized Representative Signature _____

(CREDIT UNION USE ONLY)

Membership of all Settlor-Trustees and application approved by:

Signature _____ Date _____

Membership Officer _____ Secretary of the Board _____ Treasurer of the Board _____