

# Membership Application

# Crouse Federal Credit Union

## HOW TO JOIN

New accounts can be opened Monday – Friday  
We know your time is valuable so we suggest  
calling (315)470-7928 for an appointment. Plan  
about 20-30

If you fit the criteria for our field of membership  
simply fill out this Membership Application. You  
will need two forms of identification (one must be  
US or State government issued ID). Proof of  
eligibility (Employment ID) To expedite your visit,  
consider faxing the completed forms to us prior to  
your appointment. Fax: 315-470-5633. A \$ 5.00  
minimum deposit is required to open the account.

**\*If applying by mail, application and  
identification must be notarized.**

### LOCATION:

**Crouse Business Center – Room 228**  
730 S. Crouse Avenue, Syracuse, NY 13210  
**Phone:** (315) 470-7928 **Fax:** (315) 470-5633  
**24 hr. Voice response:** (315) 425-SAVE (7283)  
**E-Mail:** CreditUnion@Crouse.org  
**Website:** [www.crousefcu.com](http://www.crousefcu.com)

### Our Hours:

Monday .....7:30 AM – 4:00 PM  
Tues-Thurs..... 8:30 AM – 4:00 PM  
Friday.....7:30 AM – 4:30 PM

### SAVINGS:

- \* Regular Shares
  - \* Christmas & Vacation Clubs
  - \* Checking Accounts
  - \* Certificate of Deposits
- With ATM or Visa Debit Card---Share Net

### LOANS:

- \*New or Used Car or Truck
- \*Healthy Choice Loans
- \*New or Used Boat or RV
- \*Share Secured
- \* Visa Credit Card
- \*Personal/Signature
- \*Other Secured
- \*Line of Credit

### OTHER BENEFITS:

- \*Mortgage Service Referral
  - \*Online Banking
  - \* Life Insurance
  - \* Free Bill Pay
  - \* Payroll Deduction
  - \* Park Discount Tickets
  - \* Free Notary Service
  - \*Money Orders
  - \*Direct Deposit
  - \*Postage Stamp
  - \*Night Deposit
  - \* Car Fax Reports
  - \* Movie Tickets
  - \*Wire Transfers
  - \* Visa Gift Cards
  - \*Western Union
  - \* Gap Insurance
  - \* Sprint Discounts
  - \* Tax Preparation Discounts
  - \* Auto/Homeowner Ins.
- Please refer to our Rate and Fee schedule for a full listing  
of current fees



Membership # \_\_\_\_\_

Membership Application (PLEASE PRINT)

Please designate the type of account.

- \_\_\_ Individual
- \_\_\_ Joint Ownership (Non-member)
- \_\_\_ Joint Account (Both parties must be members)

Indicate if two signatures are required for withdrawals Y\_\_\_N\_\_\_ (Accounts for minors 18yr under require 2 Signatures)

**How are you, the primary applicant, eligible for Membership?** Please select one of the following:

I am an employee, retiree, volunteer of Crouse Hospital or eligible company name \_\_\_\_\_

or

I am eligible because I am a family/household member of an individual who meets any of the criteria above.

Name \_\_\_\_\_ Circle One: Spouse/Daughter/Son/Grandchild/ Other Relationship

### ➤ Member To Complete:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Social Security # \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Employee # \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

Employer Name \_\_\_\_\_  
Employer Phone \_\_\_\_\_  
Department where you work \_\_\_\_\_  
Date of Hire \_\_\_\_\_  
Driver License # \_\_\_\_\_ State \_\_\_\_\_  
Email Address \_\_\_\_\_  
Mother's Maiden Name \_\_\_\_\_  
Code Word \_\_\_\_\_

### ➤ Joint Member To Complete:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Social Security # \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Employee # \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

Employer Name \_\_\_\_\_  
Employer Phone \_\_\_\_\_  
Department where you work \_\_\_\_\_  
Date of Hire \_\_\_\_\_  
Driver License # \_\_\_\_\_ State \_\_\_\_\_  
Email Address \_\_\_\_\_  
Mother's Maiden Name \_\_\_\_\_  
Code Word \_\_\_\_\_

By signing below, I/we certify, in accordance with the IRS W-9 instructions provided by the Credit Union and under penalties of perjury, that the Social Security number (SSN) Taxpayer identification number (TIN) shown is my/the correct identification number and that I am NOT, unless designated below, subject to backup withholding because I have not been notified that I am 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.

- Are you subject to backup withholding? \_\_\_\_\_ Exempt? \_\_\_\_\_
- Are you a United States Citizen, Permanent Resident Alien, or a Non-Resident Alien? \_\_\_\_\_

### AUTHORIZATION

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. I authorize the Credit Union to run a credit report. If you request it, the credit union will tell you the name and address of any credit bureau from which it received a consumer report on you.

**\*If applying by mail, application must be notarized and Applicant(s) must include a legible copy of driver's license(s) and other ID.**

X _____		X _____	
Signature of Member	Date	Signature of Joint Member	Date
X _____		X _____	
Witness by CU Staff or Notary	Date	Witness by CU Staff or Notary	Date
Approved for Membership _____	Date _____		

Your funds are insured by the National Credit Union Administration, a federal agency

**Member Please Complete**



**A minimum deposit of \$5.00 is required to establish membership and maintain a savings account.**

**In addition to a regular savings account, please sign below if enrolling in any of the following:**

- ATM Card (must be 18 years of age)
- Home Banking with E-statements
- Home Banking without E-statements
- Courtesy Pay
- Christmas & Vacation Clubs
- Certificate of Deposits---Amount \$ \_\_\_\_\_

**I/We would like information in the following areas:**

- Checking Account with Visa Debit Card (Must be 18 years of age)
- Second Chance Checking Visa or ATM Card (Must be 18 years of age)

- New or Used Car or Truck
- New or Used Boat or RV
- Visa Credit Card
- Other Secured
- Healthy Choice
- Share Secured
- Personal/Signature
- Line of Credit

**OTHER BENEFITS:**

- Online Banking
- Free Bill Pay
- Park Tickets
- Mortgage Service Referral
- Money Orders
- Direct Deposit
- Night Deposit
- Eye Care Discounts
- Wire Transfers
- Western Union
- Mortgage Service Referral
- Tax Preparation Discounts
- Life Insurance
- Payroll Deduction
- Notary Service
- Notary Service
- Car Rental Discounts
- Postage Stamps
- Car Fax Reports
- Movie Tickets
- Visa Gift Cards
- Gap Insurance
- Sprint Discounts
- Auto/Homeowner Ins

*Thank you for joining our credit union. We will do our very best to meet your personal and financial needs.*

Donna Ladley  
Manager

**Credit Union Use:**

Service	Date	Initial	Comments
Shares/Checking			
Loans			
Home Banking/EStatement			
Cash Access			
ATM/Visa Debit Card			
<b><u>Discussion:</u></b>			
Fund Availability			
NCUA Insurance			
Opt In			
<b><u>Required Actions</u></b>			
Member ID			
OFAC			
Chex systems			
Experian			
Notes			
Deductions			
Transfers			
<b><u>Follow Up Date/Info</u></b>			
Calendar Entry			
Notes			

If ATM Card approved:

Date: \_\_\_\_\_ Approved by: \_\_\_\_\_  
**ATM Card: 6414430000** \_\_\_\_\_ **0**  
**Plastic #** \_\_\_\_\_  
**Member Share # PBF: 00000** \_\_\_\_\_  
 Date Ordered \_\_\_\_\_

Forms/108 Membership Application 032015

**Account Information**

**Call anytime during our open hours. You will not deal with long phone holds, transfers, voice mail.**

Or

Visit [www.crousefcu.com](http://www.crousefcu.com) for forms and information

Or

Brochures are available across from our ATM machine in the Crouse Hospital Basement near Security.

**Deposits and Payments:**

**Payroll Deduction/Direct Deposit is always available.** You may make transactions at the credit union, by mail, or through one of our day/night drop boxes. The drop boxes are located in the basement of the West Tower—opposite the elevator and at the front door of the credit union. Forms, loan applications, and deposit/payments may be left for daily pick up. (Cash is not suggested)

**Answering Machine**

**Good Ole 24hr a day Answering Machine**

Call our 24 hr answering machine at 315-470-7927.

**To have a check mailed the same day, you must request it by 1pm.**

(Checks are mailed to the address on file)

**On Call—24 Hour Voice Response  
315-425-SAVE (7283)**

**Using your telephone:** Enter your membership number provided to you on your blue membership card. Enter the last four digits of your social security number. Follow the prompts. You may check balances, transfer money between accounts, and request checks.

**Home Banking**

**You must enroll in this product.** Using this product will provide you with current account information. You will have the ability to transfer funds between your accounts. You may request funds, obtain check copies, review newsletters for latest happenings. Members who maintain our checking accounts may enroll in our free Bill Pay program. E-Statements are available.

**Email: [creditunion@crouse.org](mailto:creditunion@crouse.org)**