



## Application for Membership and Electronic Services

### INSTRUCTIONS:

1. Complete, print and sign this form.
2. Include a check or money order for at least the minimum initial required deposits:
  - \$25.00 Savings (required account)
  - \$25.00 Christmas Club
  - \$25.00 Youth Account
  - \$25.00 any Checking AccountFor checking accounts that have a minimum balance requirement, no service charges will be implemented until the end of the first whole month.
3. Include a copy of your driver's license.
4. If eligible through your employer, include a copy of a company-issued ID badge or recent paycheck stub.
5. Enclose in an envelope and mail to:  
**PrimeWay** Federal Credit Union  
P.O. Box 53088  
Houston, TX 77052-3088
6. Don't forget the stamp!

Applications for electronic services, loans and/or credit cards can also be included with the membership application. An Electronic Services application is included in this document (Visa Debit Card and MemberLink/NetLink access).



Complete in black ink only. Please print.

ELIGIBILITY: Please check the following:

<input type="checkbox"/> Employer	Name of Company: _____
<input type="checkbox"/> Geographic	Check one: <input type="checkbox"/> Live <input type="checkbox"/> Work <input type="checkbox"/> Worship <input type="checkbox"/> School
<input type="checkbox"/> Family Member	Relative's Full Name: _____
Member # (PrimeWay's use only)	

**PRIMARY APPLICANT:**

Name: \_\_\_\_\_  
Last First MI

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Do you wish to receive newsletters and special offers via email? YES NO

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Driver's License: \_\_\_\_\_ State: \_\_\_\_\_

Employer: \_\_\_\_\_ Mother's Maiden Name: \_\_\_\_\_

**JOINT APPLICANT:**

Name: \_\_\_\_\_  
Last First MI

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Do you wish to receive newsletters and special offers via email? YES NO

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Driver's License: \_\_\_\_\_ State: \_\_\_\_\_

Employer: \_\_\_\_\_ Mother's Maiden Name: \_\_\_\_\_

**PLEASE CHECK SERVICES BEING REQUESTED AT THIS TIME:**

- Primary Savings (required for membership)
- Youth Account
- Money Market
- Christmas Club
- FREE Checking
- Premier Checking
- Elite Checking
- Overdraft Protection (for Checking, from Savings)

By completing and signing the application below, you are giving PrimeWay Federal Credit Union the authority to open a SAVINGS account along with other requested services (Further information may be required). Please note that loan requests, credit card requests and real estate requests require an additional application. (Instruction to Signer: If you have been notified by the Internal Revenue Service (IRS) that you are subject to backup withholding due to payee under reporting and you have not received a notice from the IRS that the backup withholding has terminated, you must strike out the language in clause 2 of the certification you sign below.) CERTIFICATION AS TO TAXPAYER IDENTIFICATION NUMBER AND BACKUP WITHHOLDING: Under penalties of perjury, I certify (1) that the number shown on this form is my correct taxpayer identification number, and (2) that I am not subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service (IRS) has notified me that I am no longer subject to backup withholding.

Signature (X): \_\_\_\_\_ Date: \_\_\_\_\_

Joint Signature (X): \_\_\_\_\_ Date: \_\_\_\_\_

<b>FOR PrimeWay USE ONLY</b>
TeleCheck Approval Code: _____
Posted By Teller # _____
Membership Offer: _____
COMMENTS: _____



Complete in black ink only. Please print.

PLEASE CHECK SERVICES BEING REQUESTED AT THIS TIME:

- Visa Debit Card
MemberLink (phone) / NetLink (online)

PRIMARY APPLICANT:

Name: Last First MI
Address:
City: State: Zip:
Email:
Home Phone: Work Phone:
Social Security #: Driver's License: State:
Employer: Mother's Maiden Name:

JOINT APPLICANT:

Name: Last First MI
Address:
City: State: Zip:
Email:
Home Phone: Work Phone:
Social Security #: Driver's License: State:
Employer: Mother's Maiden Name:

For Debit Card, MemberLink and NetLink, herein collectively referred to as "Electronic Access Devices (EADs)." By signing this application, I agree that the use of EADs shall be governed by the terms and conditions outlined in the "Membership and Account Agreement." I understand that I should memorize my personal identification number (PIN) whether chosen by me or issued by PrimeWay Federal Credit Union, never write it down and never tell anyone my PIN. If an additional person is joint on the account(s), I authorize the issuance of the PIN, with all rights and duties attached to it, to the named person on the account(s). The named person will also be subject to the terms and conditions outlined in the "Membership and Account Agreement." Refer to the "Rates and Fees" for other charges that may apply. Restrictions may apply. Credit approval may be required. For Debit Cards with access to credit facilities, refer to lending disclosures that may apply.

Signature (X): Date:

Joint Signature (X): Date:

Table with 3 columns: FOR PrimeWay USE ONLY, Debit Card, Teller #, Card #, Offset #, Card #, Offset #