

**Membership Application**  
**NAPUS Federal Credit Union**  
 12 Herbert St / P O Box 148  
 Alexandria, VA 22313-0148

Toll Free (800) 336-0284  
 ART (800) 851-3416  
 Fax (703) 683-1573  
 E-mail cumail@napusfcu.org

**Member Information**

**Member Number:**

Name
Address
Social Security Number
Date of Birth
Home Phone # <span style="float: right;">Work Phone #</span>
E-mail address
Mother's Maiden Name
Employment
If not a member of NAPUS, provide family or household member's name for membership qualification:
Name _____ Phone # _____
Account Number _____
Relationship to NAPUS FCU member _____

**Joint Owner**       **With Survivorship**       **Without Survivorship**

Name
Address
Social Security Number
Date of Birth
Home Phone # <span style="float: right;">Work Phone #</span>
Mother's Maiden Name

**Joint Owner**       **With Survivorship**       **Without Survivorship**

Name
Address
Social Security Number
Date of Birth
Home Phone # <span style="float: right;">Work Phone #</span>
Mother's Maiden Name

**Payable on Death Designation**

Payee:	Payee:
Address:	Address:
City/State:	City/State:

## Visa Credit Card

I would like to apply for a:

- Visa Classic
- Visa Gold
- Visa Platinum

## Payroll Deduction

For direct deposit or to start an allotment, contact PostalEase at 1-877-477-3273 or call your payroll office.  
Our routing/ABA number is: 2540 7493 4

## USA Patriot Act Disclosure

On October 26, 2001, President Bush signed into law the USA Patriot Act. This act was established to protect you, your family and our Country from terrorism by preventing financing to terrorist organizations. One section of that act (Section 326) requires NAPUS Federal Credit Union to verify the identity of all new Credit Union members. The Credit Union must also verify the identity of non-members added as signatories on accounts. In addition to verifying identification, the Credit Union must maintain a description of any document used for this purpose. Any documents used to verify identity will be secured in compliance with the Credit Union's Privacy Policy. If you are an existing member, we will need to verify and retain copies of any documents used to verify identity when you request new accounts or services.

We ask for your patience and understanding. Please remember this is a mandatory requirement from our President and we must comply for your protection and the protection of our Country.

## 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. If an ATM card or EFT service is requested and provided, I/We agree to the terms and acknowledge receipt of the EFT agreement. I agree to allow NAPUS FCU to obtain a copy of my credit report for the purpose of establishing credit.

### Social Security and Backup Withholding Information

**Also, I 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) shown is my 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.**

- I am subject to backup withholding
- Exempt
- I am not a United States citizen or resident (complete form W-8)

**The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

## Signatures

Member Signature	Date
Joint Owner Signature	Date
Joint Owner Signature	Date

### *For office use only*

Approved by Membership Officer

Origin of Membership

- Office
- Service Rep
- Convention
- Other