XCEL FEDERAL CREDIT UNION

Internal Use Only

Membership Number

Account Application & Agreement

Member Information

Full Name | Social Security No. | Date of Birth | License/Passport No. | State

Home Address | City | State | Zip Code

Mailing Address (if different) | City | State | Zip Code

Home Phone | Mobile Phone | Email Address | Mother's Maiden Name

Employer Name | Job Title | Work Phone | No. of Years of Employment

Employer Address | City | State | Zip Code

Membership Eligibility

I am eligible to join XCEL FCU through: ☐ Select Employer Group (SEG) ☐ Family Member

Select Employer Group | Family Member Name | Family Member No. | Relationship

Joint Member Information (if applicable)

Full Name | Social Security No. | Date of Birth | License/Passport No. | State

Home Address | City | State | Zip Code

Mailing Address (if different) | City | State | Zip Code

Home Phone | Mobile Phone | Email Address | Mother's Maiden Name

Employer Name | Job Title | Work Phone | No. of Years of Employment

Employer Address | City | State | Zip Code

Products

- ☐ Savings/Membership Account*
- ☐ Checking Account (choose one)
  - ☐ Basic ☐ Student Checking
- ☐ Debit Card
- ☐ Custodial Savings Account
- ☐ Money Market Account
- ☐ Vacation Savings
- ☐ Student Savings
- ☐ Holiday Savings
- ☐ Additional Savings
- ☐ Share Certificates (CDs)
  - Term _____

*$5.00 Deposit Required for New Membership

Beneficiary on Payable on Death (Joint Member and P.O.D. cannot be the same person)

P.OD. Payee Full Name | Social Security No. | Date of Birth

Full Address | Relationship to Primary Owner

P.OD. Payee Full Name | Social Security No. | Date of Birth

Full Address | Relationship to Primary Owner

Disclosure Agreement

I/We hereby make an application for membership in XCEL Federal Credit Union and agree to conform to its by-laws, rules and policies now in effect and as amended or adopted in the future and subscribe to at least one share ($5). By signing below, I/We acknowledge receipt of the Membership and Account Agreement booklet and have read the agreements and disclosures for the accounts and services requested, and I/we agree to be bound to the terms and conditions of all accounts and services that I/we may receive at XCEL Federal Credit Union now or in the future and agree that XCEL Federal Credit Union may change those terms and conditions from time to time. These terms and conditions will be disclosed in accordance with applicable state and federal laws.

Statutory Lien: If you are in default on any financial obligation to XCEL Federal Credit Union, federal law gives us the right to apply the balance of share and dividends in your account(s) at the time of default to satisfy the obligation. Once you are in default, we may exercise the right without further notice to you. I/We acknowledge and pledge to XCEL Federal Credit Union a statutory lien in my/our shares and dividends on deposits in all joint and individual accounts and any monies held by XCEL Federal Credit Union now and in the future, to the extent of any loan made and any charges payable. The statutory lien does not apply to shares in any Individual Retirement Account(s).

Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account, including joint account owners and authorized signers. Therefore, 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 will ask to see your driver's license or other identifying documents.

By signing below, I/We acknowledge that I/We have read and agree to the information/disclosure above.

Primary Owner Signature | Date

Joint Owner Signature | Date

SSN/Taxpayer Identification Number (TIN) Certification & Backup Withholding Information

☐ By signing below, I/we certify under penalty of perjury that (1) the Social Security Number (SSN)/Tax Identification Number (TIN) provided on this application is correct (or I am waiting for one to be issued); and (2) I am not subject to backup withholdings because (a) I am exempt, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) because the IRS has notified me that I am no longer subject to backup withholding, and (3) I am a U.S. citizen or other U.S. person (including U.S.resident alien) unless I have checked the box below. Please note: If part (2) of this sentence is not true in your case, please check the following box:

☐ I am subject to backup withholding.

The IRS does not require your consent to any provision of this document other than the certification required to avoid backup withholding.

Primary Owner Signature | Date

☐ I certify that I am a non-resident alien and I have completed a Form W-8BEN.

Joint Owner Signature | Date

☐ I certify that I am a non-resident alien and I have completed a Form W-8BEN.

Authorization to Run Credit

By signing below, I/we authorize XCEL Federal Credit Union to obtain a consumer credit report to evaluate my/our creditworthiness.

Primary Owner Signature | Date

Joint Owner Signature | Date