



MEMBER APPLICATION

Five empty rectangular boxes for stamps or identification numbers.

MEMBER INFORMATION

Full Legal Name: Must match ID or proper TRUST Name

First Middle Last

Address

City/State/Zip

Cell Phone []

Work Phone []

Home []

Email Address

Social Security/Tax ID#

Date of Birth / / Mother's Maiden Name

Driver's License #

Present Employer

Address

City State Zip

Membership Eligibility: I qualify for membership in this credit union because:

- I live/work in Northfield Township/Glenview or I am a B'nai B'rith Member
I am related to a member Other

Account Ownership:

- Individual Parent or Legal Guardian as custodian for minor
Joint with Right of Survivorship Trust - (copy of agreement needed)

- Joint Owner Custodian for Minor Trustee

Full Legal Name (First, Middle, Last)

Address

City/State

Zip DOB / /

Home Phone ()

Work Phone ()

Social Security/Tax ID#

Present Employer

eMail:

- Joint Owner Custodian for Minor Trustee

Full Legal Name (First, Middle, Last)

Address

City/State

Zip DOB / /

Home Phone ()

Work Phone ()

Social Security/Tax ID #

Present Employer

eMail:

BENEFICIARY1: %

Full Legal Name (First, Middle, Last)

Address

City/State/Zip

Relationship to primary:

BENEFICIARY2: %

Full Legal Name (First, Middle, Last)

Address

City/State/Zip

Relationship to primary:

BACK UP WITHHOLDING CERTIFICATION Under penalties of perjury, I certify: (1) that the Taxpayer Identification Number (TIN) that I have provided on this form is my correct (TIN) and (2) that I am not subject to backup withholding either because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service that I am subject to backup withholding as a result of failure to report all interest or dividends, or (c) the Internal Revenue Service 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). (Cross out item (2) above if the Internal Revenue Service has notified you 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. The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

PROXY The undersigned does hereby constitute and appoint the members of the Board of Directors of Glenview Credit Union, Glenview, Illinois, who are qualified and acting directors at the time this proxy is used, as proxies to vote for the election of directors, mergers and any matters with regard to which credit union shareholders are entitled to vote, all the shares of Glenview Credit Union now or hereafter owned or held by the undersigned, as the said directors or a majority of them see fit, at all annual or special meetings of the members of said credit union hereafter held and any adjournment thereof, from time to time and year to year, until and unless this proxy is cancelled by the member in writing. The undersigned further authorizes the said proxies to designate a person or committee to cast the vote or votes of the undersigned in such manner and for such candidates, as the proxy shall determine, hereby ratifying whatever the said proxies may do in the premises. The undersigned acknowledges responsibility for reading, understanding and approving this proxy.

SIGNATURES & CERTIFICATIONS By signing below, the undersigned applies for membership in the Glenview Credit Union and agrees to its by-laws and the terms and conditions of any approved account, as amended from time to time; and authorizes it to verify credit and employment history by any necessary means, including obtaining credit reports from a consumer reporting agency. The undersigned certifies that information provided on this form is true and correct and that the terms on this application apply to all accounts held by the undersigned at this credit union. The undersigned also acknowledge receipt of the credit unions deposit account disclosures and the terms and conditions that apply therein.

Signature of Member (Includes Member, Trustee, Joint or Custodian) Date / /

Signature of Joint Owner /1 (Includes Trustee, Joint or Custodian) Date / /

Signature of Joint Owner /2 (Includes Trustee, Joint or Custodian) Date / /

GCU USE ONLY REV.7.7.14 Date / / Opening Deposit \$ By Check Cash Direct Deposit Received by

ACCOUNT TYPE: Checking Savings IRA/CD Loan VISA Debit Card VISA Credit Card Trust Flex-Teller

DISCLOSURES PROVIDED: Truth-In-Savings Funds Availability Electronic Funds Transfer Privacy Overdraft Protection/Reg E

VERIFICATIONS: OFAC EFUNDS USA Government Issued Photo I.D. Minor Account/ Social Security Card Name Change

APPLICATION: Opened by Date / / Approved by Date / /