



KEMBA DELTA FEDERAL CREDIT UNION

4095 AMERICAN WAY, SUITE 10
PHONE: (901) 795-9055
TOLL FREE: 1-888-72KEMBA

MEMPHIS, TN 38118
FAX: (901) 795-9063
www.kembadelta.org

Membership Application

Account Type

All of the terms, conditions, form of account ownership, account selection and other information indicated on this application apply to all of the accounts listed below unless the credit union is notified in writing of a change

- | | |
|---|--|
| <input type="checkbox"/> Share/ Savings | <input type="checkbox"/> Christmas Club |
| <input type="checkbox"/> Share Draft/ Checking | <input type="checkbox"/> IRA (Individual Retirement Account) |
| <input type="checkbox"/> Certificate of Deposit | <input type="checkbox"/> Vacation Club |

Member Application and Ownership Information

Member Name: _____	Member # _____
Street Address: _____	SSN/TIN: ____ - ____ - _____
City/State/Zip: _____	Driver's Lic. No.: _____
Home Phone: () ____ - _____	Date of Birth: __ / __ / _____
Cell Phone: () ____ - _____	Employment: _____
Work Phone: () ____ - _____	Email: _____

Eligibility for Membership (If joining under family member): _____

Account Services

- Payroll Deduction/ Direct Deposit
Please Deduct \$ _____ per paycheck
Pay Frequency
 Weekly Bi-Weekly Monthly
- Debit Card

Account Ownership

Designate the ownership of the accounts and responsibility for the services requested.

- Individual Joint Account with Survivorship Joint Account without Survivorship

Joint Owner Name: _____	SSN/TIN: ____ - ____ - _____
Street Address: _____	Driver's Lic. No.: _____
City/State/Zip: _____	Date of Birth: __ / __ / _____
Home Phone: () ____ - _____	Employment: _____
Cell Phone: () ____ - _____	Email: _____
Work Phone: () ____ - _____	

Account Designations

- Payable on Death (POD)/ Trust Account

Beneficiary/ POD Payee _____	Beneficiary/ POD Payee _____
Street Address _____	Street Address _____
City/State/Zip _____	City/State/Zip _____

Products & Services

I would like more information about the following product and services (please check all that apply).

Membership & Personal Accounts

- Membership
- Share Draft/ Checking
- Share/ Savings
- Christmas Club
- Vacation Club
- Dividend Rates
- Direct Deposit
- Debit Card
- IRA (Individual Retirement Account)
- Certificate of Deposit

Loans & Lines of Credit

- Hassle Free Loans
- Auto Loans (New & Used)
- Back to School Loans
- Signature Loans
- Boat/Motorcycle/Camper Loans
- Visa Credit Card Loans
- Emergency Loans

Insurance

- Warranties
- Gap Insurance

TIN Certification and Backup Withholding Information

Under penalties of perjury, I certify that:

- (1) The number shown on this form is my correct taxpayer identification number,
- (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS 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).

Certification Instructions: Cross out item 2 above if you have been notified by the IRS 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.

Authorization

By signing below, I/we agree to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Disclosure, 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 access card of EFT service is requested and provided, I/we agree to the terms of and acknowledge receipt of the Electronic Funds Transfer Agreement. I/we authorize the Credit Union to check our credit and employment history, to request and use reports regarding same, and to answer questions about its credit experience with us. **The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

x	x
Signature	Date

x	x
Signature	Date