

short membership application

all applicable fields are required. thank you!

LAST NAME _____ FIRST NAME _____
MIDDLE NAME _____ BIRTHDATE _____
SOCIAL SECURITY # _____ PHONE NUMBER (____) _____
ADDRESS _____
CITY _____ STATE _____ ZIP + 4 _____ — _____
EMPLOYER _____ MOTHER'S MAIDEN NAME _____ IF KNOWN
SIGNATURE _____

Single Account Joint Account — Name of Joint Member _____
Jointor's SSN _____ Jointor's Mother's Maiden Name _____
Jointor's Signature _____



Please read and complete the information on the reverse side of this form. Member NCUA.

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I am interested in the following products or services at First American Credit Union. Additional services are available.

- | | | |
|--|---|--|
| <input type="checkbox"/> Free Checking | <input type="checkbox"/> CDs or IRAs | <input type="checkbox"/> Signature/Unsecured Loan |
| <input type="checkbox"/> Dividend Checking | <input type="checkbox"/> Student Loan | <input type="checkbox"/> Boat or RV Loan (New or Used) |
| <input type="checkbox"/> Preferred Dividend Checking | <input type="checkbox"/> Motorcycle Loan | <input type="checkbox"/> Holiday Club or Goal Setters Savings |
| <input type="checkbox"/> Credit Card | <input type="checkbox"/> Home Loan | <input type="checkbox"/> Vehicle Loan (New or Used) |
| <input type="checkbox"/> Debit/ATM Card | <input type="checkbox"/> Home Equity Loan | <input type="checkbox"/> Money Market (or Platinum MM) Account |
| <input type="checkbox"/> Direct Deposit | <input type="checkbox"/> Payroll Deduction | <input type="checkbox"/> Free Internet Banking |
| <input type="checkbox"/> Kwik Cash Line-of-Credit | <input type="checkbox"/> Free E-mail Statements | <input type="checkbox"/> Free Online Bill Payment |

First American is open to anyone living or working in Rock County, WI, Green County, WI, Western Walworth County, WI or Northern Winnebago County, IL. Family members of the above said areas are also eligible for membership. By signing this form, the signee(s) agrees to the Credit Union by-laws and the terms and conditions of any approved account, as amended from time to time, and authorizes the Credit Union to verify credit and employment history by any necessary means, including obtaining a credit report by a credit reporting agency. The signee(s) certifies that information provided on this Application is true and correct and apply to all accounts held by the signee(s) at First American. Additional forms will need to be completed.

Beloit: 608-364-3700 (Cranston Rd) or 608-364-3711 (4th St) **Janesville:** 608-754-6795 (Center Ave) **Rockton:** 815-624-7706 (Blackhawk Blvd) **Toll Free:** 800-776-7159

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| <input type="checkbox"/> Preferred Dividend Checking | <input type="checkbox"/> Motorcycle Loan | <input type="checkbox"/> Holiday Club or Goal Setters Savings |
| <input type="checkbox"/> Credit Card | <input type="checkbox"/> Home Loan | <input type="checkbox"/> Vehicle Loan (New or Used) |
| <input type="checkbox"/> Debit/ATM Card | <input type="checkbox"/> Home Equity Loan | <input type="checkbox"/> Money Market (or Platinum MM) Account |
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