BTA Federal Credit Union
Membership Application

INDIVIDUAL MEMBERSHIP APPLICATION

Please Print

ACCOUNT #

LAST NAME | FIRST | MIDDLE INITIAL

ADDRESS | APT# | CITY | STATE | ZIP

SOCIAL SECURITY NUMBER

DATE OF BIRTH

HOME PHONE

BUSINESS PHONE

I AM PAID:

- ☐ Weekly
- ☐ Monthly
- ☐ Bi-Weekly
- ☐ Pension
- ☐ Semi-Monthly

MEMBERSHIP ELIGIBILITY: Company Name _____ ☐ EMPLOYEE ☐ RETIREE

☐ FAMILY: Member's Name _____ ACCOUNT # _____ RELATIONSHIP _____

By signing below, I hereby make application for membership in and agree to conform to the bylaws and any amendments thereof in BTA Federal Credit Union. I also agree to the terms and conditions of the Membership and Account Agreement, Funds Availability Policy, Truth-in-Savings Disclosure, and to any amendment you make from time to time which are incorporated herein. I authorize the Credit Union to verify credit and employment history as needed. I acknowledge receipt of a copy of the Agreements and Disclosures applicable to the accounts and services requested.

REVERSE SIDE MUST BE COMPLETED IN ORDER TO PROCESS THIS APPLICATION

Your Signature X _____ **Date** _____

FOR OFFICE USE ONLY

This application approved by the Board of Directors and entered _____ 20 ____

_____
Chairman, Membership Committee

Account Number _____

Deposit: Date _____

☐ Cash ☐ Check $_____

By signing below, I/we hereby make application for membership in and agree to conform to the bylaws and any amendments thereof in the **BTA Federal Credit Union**. I/we also agree to the terms and conditions of the Membership and Account Agreement, Funds Availability Policy, Truth-in-Savings Disclosure, and to any amendment you make from time to time which are incorporated herein. I/we authorize the Credit Union to verify credit and employment history as needed. I/we acknowledge receipt of a copy of the Agreements and Disclosures applicable to the accounts and services requested.

CERTIFICATION AS TO TAXPAYER IDENTIFICATION NUMBER AND BACKUP WITHHOLDING

Under penalties of perjury, I certify that (1) the number shown on this form is my correct taxpayer identification number and (2) I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service (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).
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.

Member Signature _____ Date _____

CERTIFICATION IF AWAITING NUMBER

Under penalties of perjury, I certify (1) that a taxpayer identification number has not been issued to me, and that I mailed or delivered an application to receive a taxpayer identification number to the appropriate Internal Revenue Service Center or Social Security Administration Office (or I intend to mail or deliver an application in the near future), and (2) that I am not subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service (IRS) has notified me that I am no longer subject to backup withholding.

I understand that if I do not provide a taxpayer identification number to the credit union within 60 days, the credit union is required to withhold 20 percent of all reportable payments thereafter made to me until I provide a number.

Member Signature _____ Date _____

Please return completed application with an initial deposit of $25 to:

BTA Federal Credit Union
P.O. Box 24439
1320 Buffalo Road, Suite 104
Rochester, NY 14624-0349