



GUIDANCE & INSTRUCTIONS FOR PERSONAL MEMBERSHIP & DEPOSIT ACCOUNT APPLICATION

- This guidance & instructions page and the following pages constitute the full application for membership in Self-Help Federal Credit Union (the "Credit Union"). After completing the application, please remember to sign and date the last page of the application.
- Submit a check in the amount of your deposit and remember to include the amount of your membership fee along with your application. The Credit Union will confirm your membership and deposit by mailing the necessary receipts to the address you provide on the application.
- Do not include this guidance & instruction page in your mailing.

ADDITIONAL APPLICATION FORMS

- Custodian/Power of Attorney and Payable on Death Trust account forms can be found on the Self-Help website.

Please browse the Credit Union website
for a complete description of our deposit accounts and a listing of our current deposit account rates.



Savings federally insured to at least \$250,000.

MEMBERSHIP ELIGIBILITY

Membership in Self-Help Federal Credit Union is open to anyone who is, or becomes, a member of the Center for Community Self-Help.

MEMBERSHIP FEE

A \$25 membership fee is required of any new member of Self-Help Federal Credit Union. Of that fee, \$20 is a tax-deductible membership contribution to the Center for Community Self-Help. The Center for Community Self-Help is a 501(c)(3) non-profit dedicated to creating and protecting ownership and economic opportunity for people of color, women, rural residents, and low-wealth families and communities. In addition, \$5 purchases a membership share in Self-Help Federal Credit Union. Both Self-Help Federal Credit Union and Self-Help Credit Union are affiliated with the Center for Community Self-Help. As such, any person(s), business, or organization that joins Self-Help Federal Credit Union or Self-Help Credit Union must only pay the \$20 membership contribution one time to establish membership in the Center for Community Self-Help. Any Self-Help Credit Union member need only pay the \$5 membership fee to join Self-Help Federal Credit Union.

SAVINGS INSURANCE

Savings insurance coverage to at least \$250,000 applies separately to membership in Self-Help Federal Credit Union and Self-Help Credit Union.

MEMBER IDENTIFICATION & FEDERAL GOVERNMENT REPORTING POLICY

- Member Identification Program (MIP) statement: To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means to you: 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 may also ask to see your driver license or other identifying documents.
- In accordance with MIP, the Credit Union asks that you submit a copy of a current government issued photo identification of yourself and any other person(s) who will be a member and/or account-holder as identified on this application. Submit the requested identification along with your application.
- Signing this document authorizes the Credit Union to run a credit check on the signer and any account-holders whose names appear on the application.
- FACT ACT: If you have a loan with Self-Help Federal Credit Union, we may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.



PERSONAL MEMBERSHIP & DEPOSIT ACCOUNT APPLICATION

ACCOUNT SELECTION

Include your membership fee payment or the amount will be deducted from the amount of your account deposit.
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TOTAL AMOUNT OF DEPOSIT \$ _____ (including your membership fee)

Savings

Savings Account Amount \$ _____
\$25 minimum deposit to open.

Money Market

Money Market Amount \$ _____
\$500 minimum deposit to open. Monthly fee charged when the balance falls below \$500. Write three free checks per month.

50 printed checks requested (*fee charged*)

Term Certificate

\$500 minimum deposit to open each term certificate account. Available terms (in months): 3 – 6 – 12 – 24 – 36 – 48 – 60

Term Certificate Term _____ Amount \$ _____

Term Certificate Term _____ Amount \$ _____

Term Certificate Term _____ Amount \$ _____

Check here if you are opening an **Economic Development Deposit** term certificate. The dividend rate of the EDD term certificate will be set at or below the share savings account rate.

Optional: Instead of certificate earnings remaining with the balance, indicate whether you prefer certificate earnings (dividend) paid by check or deposited into your Credit Union savings or money market account. If you choose one of the abovementioned options, also indicate whether you want the dividend issued on a monthly or quarterly basis.

Issue Check Monthly Quarterly

Deposit certificate dividends into the following Credit Union account _____ Monthly Quarterly

Individual Retirement Account

Please indicate your IRA choice below. However, you will need to fill out a separate IRA application form to open an Individual Retirement Account. The Credit Union will send you the appropriate IRA application form based upon the information you provide on this application. Arrange to make your IRA deposit into the Credit Union at the time you submit the separate IRA application form.

Individual Retirement Account

IRA Type: Traditional Roth Coverdell Education Savings Account

Deposit Type: IRA Savings (\$25 minimum deposit)
 IRA Term Certificate (\$500 minimum deposit) (12 – 24 – 36 – 48 – 60 month terms available).

Source of IRA Funds: Rollover Transfer

Initial Contribution - Tax Year _____



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PERSONAL MEMBERSHIP & DEPOSIT ACCOUNT APPLICATION

AGREEMENT AND AUTHORIZATION SIGNATURE(S) & BACKUP WITHHOLDING

By signing below, I/we specifically consent and agree that Self-Help Federal Credit Union may provide legally required disclosures (Membership and Account Agreement, Truth-in-Savings Disclosure, Rate and Fee Schedules, Funds Availability Policy, Electronic Funds Transfer Agreement, and Privacy Notice Disclosure) electronically on the Self-Help website; that I/we have received and reviewed the legally required disclosures; and that I/we agree to the terms and conditions of the disclosures, and to any amendments the Credit Union may make from time to time, which are incorporated therein. I/We also understand that I/we may request a printed copy of the disclosures as an alternative to the electronic disclosures.

Under penalty of perjury, I certify that (1) my social security number or individual taxpayer identification number shown on this form, and given for this/these account(s), is my correct Taxpayer Identification Number, and that (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 because the Internal Revenue Service (IRS) has notified me that I am no longer subject to backup withholding. Cross out item 2 above if the IRS 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. Initial this section if you cross out item 2.

Yes, I want to open my Credit Union account(s), and become a member of Self-Help Federal Credit Union if I am not already a member. Furthermore, I affirm my commitment to the mission of the Center for Community Self-Help and acknowledge that I am making a \$20 membership contribution to CCSH. I hereby authorize the Credit Union to open the account(s).

Member Signature _____ **Date** _____
(Primary Account Holder)

Joint account-holder(s), POA/custodian, or POD trust beneficiaries sign and date below:

Signature _____ **Date** _____

Signature _____ **Date** _____

Please submit a copy of a current government issued photo identification of yourself and any other person(s) who will be a member and/or account-holder as identified on this application. Submit the requested identification along with this application.

Duplicate Statements

() Check here, and specify below, if you authorize Self-Help Federal Credit Union to mail duplicate statements to another party (money manager, custodian, etc.) at a different address.

Name _____ Relationship to Member _____

Mailing Address _____

City _____ State _____ Zip Code _____

How Did You Hear About Self-Help?

<u>Source</u>	<u>Identify</u>	<u>Source</u>	<u>Identify</u>
Friend	_____	Family	_____
Co-Worker	_____	Conference	_____
TV or Radio	_____	Publication	_____
Internet (Website)	_____	SHCU Borrower	_____
Branch Referral	_____	Mailing	_____

Credit Union Personnel Must Complete This Section:

OFAC verification: Check here () and initial _____

Self-Help Federal Credit Union

P.O. Box 1130 Durham, NC 27702-9938 800-966-7353 (SELF) www.self-helpfederalCU.org



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