



Norristown Bell Credit Union

"Saving Our Members Money"



MEMBER APPLICATION

Membership Sign-Up Instructions

Member Number: _____

1. Print this form and then complete the information required below.
2. Make sure all the information is filled out and that all applicant(s) have signed below.
3. When mailing this to NBCU, please include a photocopy of any applicant(s) driver's license(s) or other official I.D.
4. Include the initial minimum deposit of \$5.00 per share account and 25 cents per applicant joining, payable to NBCU.

Individual Account

Joint Account With Survivorship

Primary Owner's Name _____

Social Security Number _____

Driver's License # and State _____

Date of Birth _____

Home Phone _____

Work Phone _____

Cell Phone _____

Email _____

Home Address _____

Employer Name _____

Employer Address _____

Password for Phone Contact _____

Joint Owner's Name _____

Social Security Number _____

Driver's License # and State _____

Date of Birth _____

Home Phone _____

Work Phone _____

Cell Phone _____

Email _____

Home Address _____

Employer Name _____

Employer Address _____

Password for Phone Contact _____

Beneficiary/POD Payee

Name _____

Street Address _____

City/State/Zip _____

Social Security # _____

Date of Birth _____

Relationship to Member _____

Beneficiary/POD Payee

Name _____

Street Address _____

City/State/Zip _____

Social Security # _____

Date of Birth _____

Relationship to Member _____

ACCOUNT TYPE Suffix

Share/Savings _____

Share Draft/Checking _____

Share Certificate _____

Sub-Share/Savings _____

Vacation Club _____

Holiday Club _____

ACCOUNT SERVICES

ATM Card: _____

Debit Card: _____

Online Banking: _____

TellerLine: _____

Overdraft Protection:

From: # _____

Payroll/Direct Deposit: _____

Web Joint Access: **YES** or **NO**

TIN Certification and Backup Withholding Information

Check only if applicable.

____ I am subject to backup withholding under the provisions of Section 3406(a) (1) (c) of the Internal Revenue Code.

____ Exempt

____ I am not a United States citizen or resident. (Must complete W-8 or W-8 BEN form)

Membership Eligibility

Check all that apply:

___ Primary ___ Joint

I live in Montgomery County, PA

___ Primary ___ Joint

I work in Montgomery County, PA

___ Primary ___ Joint

I volunteer in Montgomery County, PA

___ Primary ___ Joint

I worship in Montgomery County, PA

___ Primary ___ Joint

I attend school in Montgomery County, PA

___ Primary ___ Joint

I own a business in Montgomery County, PA

Business Name & Address: _____



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Under penalty of perjury, I hereby certify that all of the information provided on this form is true, correct and complete. From time to time, you (NBCU) are permitted to obtain my credit report in conjunction with any application as well as authorize to submit to ChexSystems for verification purposes. I hereby make application for membership to NBCU and agree to conform to its bylaws and amendments thereof and subscribe for one share. I/We agree to the terms and conditions of the Membership and Account Agreement, Truth in Savings Rate and Fee Schedule, Funds Availability Policy Disclosure and to any amendment(s) NBCU makes from time to time, which are incorporated herein.

Signature of Primary Owner _____

Date: _____

Signature of Joint Owner _____

Date: _____

FOR CREDIT UNION USE ONLY

Account Opened By: _____ Date _____

Account Checked By: _____ Date _____

ChexSystems Authorization completed [] Inquiry ID _____

Accept [] Decline [] Reason: _____

Last Updated 11/4/15 LEL