

# Universal Signature Card

Member number

PLEASE PRINT

**Primary Member**

Mr.  Ms.  Mrs.

Last Name		First Name		Middle
Address		City	State	ZIP
Social Security Number			Date of Birth (mm/dd/yyyy)	
Driver's License #		State		Expiration

**Associate Member**

Mr.  Ms.  Mrs.

Last Name		First Name		Middle
Address		City	State	ZIP
Same as Primary Member <input type="checkbox"/>				
Social Security Number			Mother's Maiden Name	
Driver's License #		State		Expiration
Home Phone		Cell Phone		Date of Birth (mm/dd/yyyy)
Email Address				
Occupation			Work Phone	

New Account  Change Existing Account  Add Associate

ATM Card  Debit Card

Account Suffixes
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Checking  Savings  Money Market  Certificate

## Name Change

Current	Change	Type of Legal Document
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By signing below, I/we authorize Patelco Credit Union to check my credit history including the verification of the information on this request. Copies of my paystub may be required. I/We understand that Patelco may contact me for further information, and that this application must be completed fully for Patelco to process my request. Patelco may obtain information from others about me and give credit information to others.

I/We agree that Patelco may elect not to extend account services based on information obtained in its review. I/We may be required to provide a paystub copy or other documentation as needed by the Credit Union. I/We understand that Patelco may contact me for further information, and that this application must be completed fully for Patelco to process my request. You may obtain information from others about me and give credit information to others.

I/We certify under penalty of perjury that the Social Security Number given to the Credit Union on this application is correct. I/We have never received a notice from the Internal Revenue Service of under-reporting of dividends or interest. I/We am/are not now obligated to have dividends or interest withheld. By signing this form, I/we have read and agree to the terms and conditions of Patelco's Universal Account Disclosure and Fee Schedule contained in Patelco's Member Handbook: Account Disclosures, Fee Schedule and Privacy Policy, as amended from time to time, plus any supplemental documents I/we receive.

**Please refer to the separate applicable product brochures and the Universal Account Disclosures for additional information and requirements concerning these products. Checking Accounts and ATM Cards are subject to approval.**

Primary Member Signature	Date (mm/dd/yyyy)
Signature of Associate Member	Date (mm/dd/yyyy)

If all associate members are not present in the branch, the associate members must be verified through IDology or the notary form on page 2 must be notarized.

- Associate members have been verified through IDology. MSR Initials \_\_\_\_\_
- Member will have associates' signatures notarized on page 2. Application to pending file.

## Notary Form

### State of California

County of \_\_\_\_\_ Subscribed and sworn to (or affirmed) before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_ proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

(Seal)	Notary Signature
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Federally Insured by NCUA