



P.O. Box 14864 - Reading, PA 19612

Young Adult Signature Card

USA PATRIOT ACT Section 326 - Customer Identification Program: 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 for 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's license or other identifying documents.

Account Owner

Name _____
First MI Last, Suffix (if any) _____ Email _____

_____ Date of Birth (mm/dd/yy) _____ Social Security Number _____
 _____ Employer _____ Employer ZIP Code _____

_____ Mother's Maiden Name _____
 _____ Home Phone _____

DL/Gov't Issue ID _____ State or Country of Issue _____ Expiration Date _____
 _____ Driver's License or Government Issued ID Number _____
 _____ Work Phone _____
 _____ Cell Phone _____

Agreement and Signature

I agree to maintain a minimum balance of \$5.00 in my Share Savings Account.

I certify the information provided is true and correct and authorize UECU to check my account, credit, employment history, and to obtain consumer reports from third parties, including credit bureau reports, in order to determine my eligibility for Credit Union accounts and services. I understand that UECU may rely on information in this application and in consumer and credit bureau reports to make its decision.

By signing this application, I agree to the conditions stated in the Account Agreement and Disclosures, Rate and Fee Schedules, and Credit Union Bylaws and Policies, and any amendments to these documents made from time to time which collectively govern my membership and accounts. Note: The Internal Revenue Service does not require your consent to any provision of this document other than certifications required to avoid backup withholding.

Signature (please sign in ink) _____ Date _____

Additional Information Request

I am interested in the following Credit Union services/products:

- VISA® Credit Card
- Vehicle Loan
- Checking
- Direct Deposit/Payroll Deduction
- Other _____
- Advantages Online™* (home banking)
- Advantages Bill Pay™*
- E-Statements*
- Advantages Visa Debit Card™*

Please visit www.uecu.org to view more information.

UECU office use only			
Verify Eligible	_____	Date	_____
Entered	_____	Date	_____
DS Verify	_____	Date	_____
Account #	_____	Tlr#	_____

