



111 Empire Drive  
 St. Paul, MN 55103  
 651.291.1515 | 800.899.5626  
 hiway.org

# MEMBERSHIP APPLICATION

New Membership      Add Checking Account

Member #: \_\_\_\_\_

Application #: \_\_\_\_\_

A \$5 minimum balance is required to establish and maintain your membership.

## Section A: Type of Services Desired

Select all that apply.

- Savings Account (required)      Loan/Credit Card: \_\_\_\_\_  
 ATM card(s) automatically issued to Savings-only Account(s):      Member      Joint  
 Checking Account (Checks ordered upon your request.)      Other \_\_\_\_\_  
     Minnesota Wild Free Checking      Benefits Plus®      Free Checking  
 Debit card(s) automatically issued to Checking Account(s):      Member      Joint

USA Patriot Act 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 opening an account. Hiway Federal Credit Union® (Hiway) will verify certain information as required by Federal law.

## Section B: How do you qualify for membership?

Work for qualifying company or government agency:

Live, work, worship or attend school in the Metro Community Area:

\_\_\_\_\_  
 Company or Agency Name

\_\_\_\_\_  
 Address

MN Recreation & Park Foundation:      Already member      Will become member

Qualify through relative/roommate:

Association of the U.S. Army (AUSA):      Already member      Will become member

\_\_\_\_\_  
 Name & Relationship

## Section C: Applicant Information (Please complete all sections)

How did you hear about Hiway?					
First Name:		MI:	Last Name:		
Soc. Sec. #/TIN: <small>(If under age 18, legal adult is required as a Joint Tenant)</small>		DOB:		Mother's Maiden Name:	
ID Type:	Driver's License	State ID	Passport	Other ID*:	Issue Date:
ID#:	Expiration Date:		Issuing State/Country:		
Address: <small>(Cannot accept P.O.Box)</small>					
City:			State:		Zip:
Cell #:		Home #:		Work #:	
E-mail :				Employer:	
Occupation:		Length of Employment: Yrs.      Mos.		Gross Mo. Income: \$	
Rent	Own	Live with Relatives	Other	Mo. Mtg/Rent: \$	Length at Residence: Yrs.      Mos.

\*Must be a form of government-issued unexpired photo identification.

## Section D: Joint Tenant/Co-Applicant Information (Please complete all sections)

First Name:					
MI:		Last Name:			
Soc. Sec. #/TIN:		DOB:		Mother's Maiden Name:	
ID Type:	Driver's License	State ID	Passport	Other ID*:	Issue Date:
ID#:	Expiration Date:		Issuing State/Country:		
Address: <small>(Cannot accept P.O.Box)</small>					
City:			State:		Zip:
Cell #:		Home #:		Work #:	
E-mail :				Employer:	
Occupation:		Length of Employment: Yrs.      Mos.		Gross Mo. Income: \$	
Rent	Own	Live with Relatives	Other	Mo. Mtg/Rent: \$	Length at Residence: Yrs.      Mos.

\*Must be a form of government-issued unexpired photo identification.

**Section E: Certification of Account Information**

Minnesota law requires the Member/Owner to complete the following information before opening a share draft or checking account:

- 1. Within the last twelve (12) months, has anyone on this application had a transaction or checking account at this or another financial institution?  
No Yes If yes, where? \_\_\_\_\_
- 2. Within the last twelve (12) months, has anyone on this application had a checking account closed by a financial institution without their consent?  
No Yes If yes, why? \_\_\_\_\_
- 3. Within the last twenty-four (24) months, has anyone on this application been convicted of a criminal offense because of the use of a check or other similar item?  
No Yes

An applicant who provides false information regarding the above questions is guilty of perjury pursuant to Minn. Stat. 48.512.

**Authorized Signatures and Agreement to Terms**

By signing below, you acknowledge receipt of and agree to the terms All About Your Accounts disclosure, Privacy Policy, Rates Schedule and the Service Fee Schedule concerning the account. You certify, under penalty of perjury, that all information given on this form is true and correct. Designating a Joint Tenant will create joint tenancy ownership rights with rights of survivorship on all accounts, excluding funds in IRA accounts, certificates, initial \$5.00 share and loans (unless a co-applicant). You as the member may, at any time, without consent of joint tenant(s), close the account, add a joint tenant or beneficiary or remove the name of any or all joint tenants or beneficiaries by written notice to Hiway. Any monies may be deposited or withdrawn, subject to the bylaws and rules of Hiway, upon any one of the authorized signatures. By signing below, you also agree to allow Hiway to check your credit and employment history at any time to answer questions about your credit experience. If the member applying is a MINOR, the joint tenant of the account must be a legal guardian/adult, and is responsible for ALL TRANSACTIONS on this account. You acknowledge that we may share information pertaining to your accounts with credit bureaus and others as allowed under applicable law.

Suspension of electronic services and access to share or deposit accounts. By signing below, you understand and agree that we may suspend some or all electronic services, Debit/ATM cards and access to your other account(s) if you become delinquent on any of your loan or deposit obligations to us or you cause a loss to us, in accordance with applicable law. We shall not be liable to you in any regard in connection with such suspension of services.

Security Interest: All present and future deposits into your accounts will secure any and all obligations that you owe the Credit Union, including fees and charges as well as loans and credit cards that you have with us.

THE INTERNAL REVENUE SERVICE (IRS) DOES NOT REQUIRE YOUR CONSENT TO ANY PROVISION OF THIS DOCUMENT OTHER THAN THE CERTIFICATION REQUIRED TO AVOID BACKUP WITHHOLDING.

<u>X</u>	<u>X</u>
Applicant's Signature	Joint Tenant's Signature
Date	Date

(If under age 18, legal guardian/adult is required as a Joint Tenant)

**Certification of Taxpayer Identification Number and Backup Withholding - Complete the following section:**

Under penalty of perjury, you certify that the Social Security Number shown is your correct identification number and that you are NOT subject to backup withholding because you are exempt or you have not been notified that you are subject to backup withholding as a result of failure to report all dividends or interest, or because the IRS has notified you that you are no longer subject to backup withholding and that you are a U.S. citizen (including a U.S. resident alien).

You ARE subject to backup withholding.
  You are NOT a United States citizen or resident alien.

If you are not a U.S. citizen or resident alien, you MUST complete IRS form W-8. Contact Hiway for a form.

<u>X</u>	<u>X</u>
Applicant's Signature	Parent or Legal Guardian's Signature
Date	Date

(If under age 18, parent or legal guardian must certify TIN)