

## Spojnia Credit Union Membership Application Instructions

There are two easy ways to apply for a Spojnia Credit Union Membership:

Complete the application:

1. Bring it to the credit union (with the required identification and the minimum share deposit of \$5.00).
2. Mail it to the credit union (with the required identification and the minimum share deposit of \$5.00) to:

Spojnia Credit Union  
1006 Pittston Avenue  
Scranton, PA 18505

The USA Patriot Act of 2001 requires Spojnia Credit Union to help the government fight the funding of terrorism and money laundering activities. Because of this federal mandate, we must obtain identifying information from you and verify the authenticity of that information before you can open a new account with us.

When you open a new account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We will also ask that you supply us with two forms of identification. At least one form must be a valid government issued picture form of identification and the other can be a non-photograph form of identification. We will accept identification from the following list:

1. Valid (current) Government Issued ID or Driver's License
2. Government Issued Social Security Card
3. Employer ID Card
4. Student ID Card
5. Passport
6. Other National ID Document (Military ID, Voter's Registration Card, Alien Registration, US Coast Guard Merchant Mariner Card, Native American Tribal Document)
7. Less than 18 years of age will require birth certificate and may present a school, clinic, doctor, hospital, day care or nursery school record.
8. Certified Articles of Incorporation, Government Issued Business License, Partnership Agreement, Representative Payee Documentation or a Trust Instrument.

Spojnia Credit Union appreciates your patience and understanding as we all do our part in complying with the new account identification procedures required by the federal government.

**(A Polish National Union of America Insurance Policy, Social Membership or Annuity is required for Spojnia Credit Union Membership)**

**Spojnja Credit Union**

**Membership Application**

Please provide all requested information, sign and date. **To be eligible for membership you must have a policy, social membership or annuity with the Polish National Union of America.** A photocopy of a current driver's license or government issued document is required in accordance with the USA Patriot Act for all owners of the account. A Joint owner or owners may be added to the account with proper identification. A copy of a birth certificate is acceptable identification for minors. A Share (Savings) Account is required before any additional accounts can be opened. A deposit of \$5.00 must accompany application. This is the minimum share deposit required.

Account Number\* \_\_\_\_\_ number will be assigned by the credit union

\_\_\_\_\_ Share (Savings) Account

\_\_\_\_\_ Vacation Club

\_\_\_\_\_ Share Draft (Checking) Account

\_\_\_\_\_ Christmas Club

\_\_\_\_\_ Share Certificate

**Member/Owner:** \_\_\_\_\_

Street: \_\_\_\_\_ SSN/TIN: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I want to opt out of all email communications: \_\_\_\_\_ Yes \_\_\_\_\_ No

Membership Eligibility: \_\_\_\_\_

(This is your Polish National Union of America certificate number. Contact the credit union with any questions.)

**Joint Owner:** \_\_\_\_\_

Street: \_\_\_\_\_ SSN/TIN: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Joint Owner:** \_\_\_\_\_

Street: \_\_\_\_\_ SSN/TIN: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Joint Owner:** \_\_\_\_\_

Street: \_\_\_\_\_ SSN/TIN: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

By signing below, I/We certify in accordance with the IRS W-9 instructions provided by the Spojnia Credit Union and under penalties of perjury, that the Social Security Number (SSN)/Taxpayer Identification Number (TIN) shown is my/the correct identification number and I am NOT, unless designated below, subject to backup withholding because I have not been notified that I am subject to backup withholding as a result of a failure to report all dividends or interest or because the IRS has notified me that I am no longer subject to backup withholding.

\_\_\_ I am subject to  
Backup Withholding

\_\_\_ Exempt

\_\_\_ I am not a United  
States Citizen or Resident

By signing below, I/we agree to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Rate and Fees Disclosure, Funds Availability Policy Disclosure, if applicable, and to any amendment the Credit Union makes from time to time which are incorporated herein. I/We acknowledge receipt of a copy of the agreements and disclosures applicable to the accounts and services requested herein. In considering this application and/or any request for financial services, you authorize the Credit Union to check your credit and employment history, to request and use reports regarding same, and to answer questions about its credit experience with you. ***The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.***

X \_\_\_\_\_  
Signature Date

X \_\_\_\_\_  
Signature Date

X \_\_\_\_\_  
Signature Date

X \_\_\_\_\_  
Signature Date

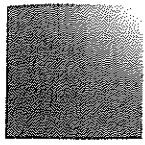
\*Account number will be assigned by the credit union.

Return to: Spojnia Credit Union - 1006 Pittston Avenue - Scranton, PA 18505 with all necessary paperwork, photo identification and initial deposit.

Credit Union Use Only:  
Date of Membership: \_\_\_\_\_  
Member Verification: \_\_\_\_\_

Opened/App/d by: \_\_\_\_\_  
Disclosures: \_\_\_\_\_

Federally Insured by NCUA (National Credit Union Association)



# SCU

SPOJNIA CREDIT UNION

1006 Pittston Avenue, Scranton, PA 18505  
570-344-1513 \* 1-800-724-6352 \* Fax: 570-961-5961  
[www.spojniacreditunion.org](http://www.spojniacreditunion.org)

To Our Members:

“As required by the USA Patriot Act of 2001, which requires Spojnia Credit Union to help the government fight the funding of terrorism and money laundering activities, the credit union must obtain basic identifying information from you and verify that information when you open a new account.

This means Spojnia Credit Union staff will ask you for some basic information such as your name, address, date of birth and other information designed to help us identify you. Spojnia Credit Union staff may also ask to see documents identifying you too such as a driver’s license, passport or some other government-issued document. Spojnia Credit Union appreciates your patience and understanding as we all do our part in complying with the new account identification procedures required by the federal USA Patriot Act of 2001.”

Respectfully,

The Board of Directors,  
Staff and Members of  
Spojnia Credit Union