

**Standard Checking Account**

**Premium Checking Account**  
 (\$10,000.00 minimum balance required to open account.)

**PLEASE PRINT NAME(S) TO APPEAR ON YOUR CHECKS/CARD(S):** (All information must be completed to process.)

Member: \_\_\_\_\_ Soc. Sec. #: \_\_\_\_\_

Joint Member: \_\_\_\_\_ Soc. Sec. #: \_\_\_\_\_

Residence Address: \_\_\_\_\_  
 (Checks will be printed with the above address & mailed to the above address unless specified below.)

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

Mailing Address: \_\_\_\_\_  Mail checks to this address  
 (Write "same" or if different from residence address provide: address, city, state, and zip.)

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

**Check One: Do you want checks?**  Yes  No

Office Use Only Check Code: Price:
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**Mark the following to appear on the checks** (check all that apply):

- Joint Owner     Home Phone #     Residence Address     Mailing Address

**How many CashPlus/ATM Cards?**  None  One  Two (Maximum 1 card per person; 2 cards per account)

**Do you want Overdraft Protection on your checking account?**  No  Yes If yes, all applicants must apply and be members.

**If yes, are you a U.S. Citizen?**  No  Yes **Co-Applicant**  No  Yes

**IMPORTANT: Read before completing this overdraft protection application and check appropriate box:**

- If you are applying for an individual account in your own name and are relying on your own income or assets.  
 If you are applying for a joint account or an account that you and another person will use.

We intend to apply for joint credit.

Applicant Initials \_\_\_\_\_ Co-Applicant Initials \_\_\_\_\_

- If you are applying for an individual account, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested.

I hereby make application for a checking account with a CashPlus® debit card or an ATM account & overdraft protection in the General Electric Credit Union (GECU) and agree to conform to its bylaws and any amendments thereto. I/we authorize GECU or any credit bureau or other investigative agency employed by the Credit Union to investigate my credit, employment history or any other information and to report to others such information and credit experience with me. I acknowledge receipt of the "Know Your Share and Share Draft Accounts" and rate sheet, and if applicable, the Overdraft Protection Disclosure. This account is subject to all terms and conditions as stated in that disclosure as amended from time to time, and incorporates the same by reference to this agreement. **Joint Share Agreement:** The General Electric Credit Union is hereby authorized to recognize any of the signatures subscribed hereto in the payment of funds or other transaction of any business for this account. The joint owners of this account hereby agree with each other and with said Credit Union that all sums now paid in on shares, or heretofore or hereafter paid in on shares by any or all of said joint owners to their credit as such joint owners with all accumulations thereon, are and shall be owned by them jointly, with right of survivorship and be subject to the withdrawal or receipt of any of them, and payment to any of them or the survivor or survivors shall be valid and discharge said Credit Union for any liability for such payment. Any or all said joint owners may pledge all or any part of the shares in this account as collateral security for a loan or loans. The right or authority of the Credit Union under this agreement shall not be changed or terminated by said owners, or any of them, except by written notice to said Credit Union which shall not affect transactions therefore made. The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applications on the basis of sex and marital status. The federal agency which administers compliance with this law concerning this credit union is the National Credit Union Administration, 7000 Central Parkway, Suite 1600, Atlanta, GA 30328. The Ohio Laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law. **TO SECURE THE PAYMENT OF YOUR ACCOUNT OR ANY LOANS, YOU GRANT US A SECURITY INTEREST IN SHARES AND DEPOSITS HELD BY YOU WITH US, WHETHER HELD BY YOU ALONE OR JOINTLY. IF YOU DEFAULT, WE SHALL HAVE THE RIGHT TO APPLY ANY AND ALL AMOUNTS IN SAID SHARE ACCOUNTS AND DEPOSITS TO THE PAYMENT OF YOUR OBLIGATIONS TO US.**

Under penalties of perjury, I certify that: 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and 3. I am a U.S. person (including a U.S. resident alien).

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

**Member Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Driver's License #:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Joint Member Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Driver's License #:** \_\_\_\_\_ **State:** \_\_\_\_\_

*Please note: Ohio State Law requires that you provide a photocopy of your valid driver's license with your application. If you are applying for a joint account, copies of both driver's licenses are required.*

**PLEASE TURN THE CARD OVER TO COMPLETE THE BACK SIDE.**

## Safe Deposit Box

\_\_\_\_\_ Safe Deposit Box     Yes     No

(Please initial)

*If yes, please complete the necessary forms for opening a safe deposit box.*

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## GECU Credit Card

\_\_\_\_\_ GECU Credit Card     Yes     No

(Please initial)

*If yes, please complete a credit card application.*

### OFFICE USE ONLY:

Initials of employee taking the application    Employee: \_\_\_\_\_

Account opened and disclosure sent    Employee: \_\_\_\_\_    Date: \_\_\_\_\_    Beacon: \_\_\_\_\_    OP LOC: \_\_\_\_\_

Yes     No    Member passed ChexSystems

Checks ordered    Employee: \_\_\_\_\_    Date: \_\_\_\_\_    Approval Agent: \_\_\_\_\_

ATM ordered (\_\_\_\_)     CashPlu\$ ordered (\_\_\_\_)     CashPlu\$/ATM closed (\_\_\_\_)    Employee: \_\_\_\_\_    Date: \_\_\_\_\_

Action:     New Account     Name Change (Previous name: \_\_\_\_\_)

Add Joint     Remove Joint (Name removed: \_\_\_\_\_)