MEMBERSHIP APPLICATION Please complete the application here, then print it out, sign and return to Southern Security via mail or in-person. PRIMARY OWNER (MEMBER) MALE FEMALE LAST NAME (JR., SR.) FIRST NAME SOCIAL SECURITY #/ TIN MI DATE OF BIRTH OTHER 🗖 STREET ADDRESS CITY HOME PHONE # STATE 7IP MAILING ADDRESS (if different from above) CITY STATE ZIP CELL PHONE # **IDENTIFICATION TYPE** NUMBER STATE/COUNTRY **EXPIRATION DATE** MEMBERSHIP ELGIBILITY ☐ Driver's Lic/State ID Employer Association Family ☐ Military ID MOTHER'S MAIDEN NAME **EMAIL ADDRESS** ☐ Passport Other_ **EMPLOYER** DATE STARTED OCCUPATION/TITLE EMPLOYER PHONE # **EMERGENCY CONTACT** CITY & STATE RELATIONSHIP CONTACT'S PHONE # **OWNERSHIP TYPE** INDIVIDUAL (Sole Ownership) JOINT (Tenants with Right of Survivorship) UTMA TRUST (Separate Agreement on File) JOINT OWNER 1, if applicable MALE FEMALE OTHER LAST NAME (JR., SR.) FIRST NAME MI DATE OF BIRTH SOCIAL SECURITY #/ TIN STREET ADDRESS CITY STATE ZIP HOME PHONE # MAILING ADDRESS (if different from above) CELL PHONE # CITY STATE ZIP **IDENTIFICATION TYPE** NUMBER STATE/COUNTRY **EXPIRATION DATE** ☐Driver's Lic/State ID Military ID MOTHER'S MAIDEN NAME **EMAIL ADDRESS** Passport Other **EMPLOYER** DATE STARTED OCCUPATION/TITLE EMPLOYER PHONE # JOINT OWNER 2, if applicable MALE FEMALE OTHER LAST NAME (JR., SR.) FIRST NAME MΙ DATE OF BIRTH SOCIAL SECURITY #/ TIN STREET ADDRESS CITY STATE ZIP **HOME PHONE #** MAILING ADDRESS (if different from above) CITY STATE ZIP CELL PHONE # **IDENTIFICATION TYPE** NUMBER **EXPIRATION DATE** STATE/COUNTRY ☐ Driver's Lic/State ID ☐ Military ID MOTHER'S MAIDEN NAME **EMAIL ADDRESS** Passport Other_ OCCUPATION/TITLE **EMPLOYER** DATE STARTED **EMPLOYER PHONE #**



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BENEFICIARY NAME	ADDRESS		DAIE	OF BIRTH RE	LATIONSHIP	SOCIAL SECURITY #
BENEFICIARY NAME	ADDRESS		DATE	OF BIRTH RE	LATIONSHIP	SOCIAL SECURITY #
ACCOUNT TYPE AND	SERVICES (check	all that apply)				
■ Share/Savings (\$25 r ■ Miscellaneous Share ■ Holiday Club	·	De	are Draft/Checking (Apbit MasterCard (Shar	e Draft/Checl	cing required	<u> </u>
Money Market		Cards	requested: Prima	ry Member	Joint Owne	er 1 🔲 Joint Owner 2
ESTIMATED ACCOUNT	ACTIVITY (checl	all that apply)				
Account Product	Activity	Account P	roduct Activity		Account Pro	duct Activity
ACH – Electronic Banking Transactions		Money Orders or Cashier's Checks			☐ E-Statements	
Debit Card – ATM Acc	ess or Purchases	☐ Wire Transfer –			bile Banking	
☐ Online Banking Monthly Cash Deposits	□ \$0 _ \$50	☐ Wire Transfer – 000 ☐ \$5001 – \$10		DD Bill	ray	
Monthly Cash Withdra		000				
IMPORTANT IRS INFO	RMATION - TIN CE	RTIFICATION				
SIGNATURES						
By signing this application	You hereby make	application for mem	bership in Southern Se	ecurity Federal	Credit Union	You warrant the truth
By signing this application of the information contain agree to be bound by the Southern Security Federal Credit Unbut not limited to, Truth-in Transfer. To help the gover to obtain, verify, and recoyou open an account, we ask to see your driver's licagree to indemnify the Cryou authorize any person Southern Security Federal The Internal Revenue Se	ned in Your applicate agreements set for I Credit Union now ion account agreeme n-Savings Disclosure nment fight the func and information that will ask your name, eense and other idei redit Union from and association, firm, of Credit Union, includi	on for membership a th in the Membershi in effect and as amer ents for the type of ace privacy Policy, Rate ling of Terrorism and r will allow us to idential address, date of birt address, date of birt atifying information. If y and all liability for in orporation, or person ong the checking of Yo	and/or in subsequent in pand Account Agree, inded or adopted here count(s) and services in and Fee Schedules, Innoney laundering activity each person who on, and other informativity ou agree to hold Sou juries or damages that and office to furnish in credit and employment and Account and employment of the country of the	representations ment and to all after. You acknot dicated in this runds Availabilities, Federal Lapens an accourth at will allothern Security that arise as a resunt history and ent history and	to us. You and bylaws, rules bylaws, rules bylaws, rules bylaws, rules bylaws, rules bylaws, requires all the thing to the control of the con	and all joint owners and regulations of ipt of Southern opplication including, and Electronic Funds financial institutions means for you: When ify you. We may also t Union harmless and redit Union request of credit reports.
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