

Master Membership Application

| Open Date: | |
|------------------|--|
| Member Number: _ | |
| Share ID: | |

P.O. Box 1071 | Poughkeepsie, NY | 12602-1071 845.463.3011 | hvcu.org

| | , Dutchess, Greene | | laer, Rockland, Sarat | oga, Schenectady, Ulster o | or Westchester |
|--|---|--|---|---|---|
| D.: | I 4 ' C' 4 ' | | | | |
| Primary Owner lo | | ID# | Date Issued: | Exp. Date: | |
| Certificate Detail | s | | | | |
| | | Dividend Disbursen | ment Credit to | Certificate Credit to S | hare ID: |
| Primary Account | Owner | | | | |
| First Name | Last Name | MI Date of Birth | Social Securit | y Number Busines | s Phone |
| Residential Address | ; | City | State ZIP | Home Phone | Mobile |
| Mailing Address | | | Pass code | Email | |
| You DO NOT at services or products associated with you | uthorize Hudson \ that may benefit r account, includi | cessary equipment and ak /alley Credit Union from ti you, make telephone calls ng wireless telephone nur | ime to time and for a s and/or send text m mbers that could resu | iny lawful reason includin essages to you at any tele ult in charges to you as di | ephone number ctated by your |
| prerecorded/artificionals to you at any elaw. In other words, method described hauthorization is valid | al voice messages email address you if you do not cheo ere. Checking this d until you expres | n these calls or text message and/or automatic telepho provide us or use other el ck this box, you expressly a s box will NOT impact you sly revoke it. Consent may 11 or www.hvcu.org. | one dialing system. F lectronic means of co AUTHORIZE Hudson r membership appro | Hudson Valley Credit Unio ommunication to the exte Valley Credit Union to co oval process. Please note t | n may also send e- ent permitted by ntact you via any his written |
| selling and evaluat application to Huds expressly AUTHORIZ and evaluating your to Hudson Valley C process or evaluati | ing your eligibili on Valley Credit I ZE Hudson Valley eligibility for var Credit Union for a on for the instar d until you express | n Valley Credit Union to ty for various loans, product Union for a loan, product Credit Union to use you ious loans, products and a loan, product or service at product or service for sly revoke it. Consent may | ducts and services, or service. In other ur credit report and services, each time e. Checking this box which you have a | each time you open an er words, if you do not of I credit data for the pur you open an account or x will NOT impact your mapplied or chosen. Plea | account or make ar check this box, you pose of cross-selling make an application nembership approva se note this writter |

| IMPORTANT INFORMATION ABOUT THE PROCEDURES FOR OPENING A NEW To help the government fight the funding of terrorism and money laundering ac to obtain, verify, and record information that identifies each person who opens a | tivities, Federal law requires all financial institutions |
|---|---|
| What this means for you: When you open an account, we will ask you for your r ion that will allow us to identify you. We may also ask to see your driver's license | |
| By signing or otherwise authenticating, I/we agree to the terms and conditions Agreement, Fee Schedule, Account Rate Information, Privacy Notice, Overdraft Papplicable. If an access card or EFT service is requested and provided, I/we agreement and Disclosure. I/We acknowledge receipt of the agreements and direquested herein, and to any amendment the Credit Union makes from tin which will be posted on the credit union's web site for immediate review. after the posting of such amendments constitutes my/our acceptance of responsibility to monitor for amendments and changes on a regular basis. | Notice, and Funds Availability Policy Disclosure, if ree to the terms of the Electronic Fund Transfers sclosures applicable to the accounts and services ne to time which are incorporated herein, and My/our continuing to use credit union services |
| Sharing Information | |
| ☐ If this box is left unchecked, information relating to your account(s) may be a This application serves as the Master Membership Account Application or Suppl accounts opened under this member number, except for Trust Accounts, and i account for you on your verbal request and deposit of funds. | emental Application, and controls all subsequent |
| Taxpayer Identification Number (TIN) Enter your TIN in the appropriate box. For individuals, this is your Social Security Number (SSN). For most entities, it is your Employer Identification Number (EIN) If you do not have a number, refer to the instructions outlined on the Internal Revenue Service's Website: www.irs.gov | |
| TIN Certification You certify under penalties of perjury that the following is true: (1) The number identification, and (2) you are not subject to backup withholding. You agree the IRS that you are currently subject to backup withholding because of underreturn. (3) You are a U.S. citizen or other U.S. person. For federal tax purposes, you individual who is a U.S. citizen or U.S. resident alien; a partnership, corporation, in the United States or under the laws of the United States; an estate (other than defined in Regulations section 301.7701.7). (4) The FATCA code(s) entered on the from FATCA reporting is correct. Exempt payee code (if any) exe The Internal Revenue Service does not require your consent than the certifications required to avoid backup withholding. | e to check the box if you have been notified by eporting interest or dividends on your tax ou are considered a U.S. person if you are: an company, or association created or organized in a foreign estate); or a domestic trust (as is form (if any) indicating that you are exempt imption from FATCA reporting code (if any) |
| Signature and TIN Certification (with Title, if applicable) Date | |