



Relative/Guardian Statement of Identification for Minor

This form is to be used to identify potential members age 0 – 17 years that do not have a primary or secondary form of identification. This form should be attached to the Membership Application and forwarded to Records Processing in accordance with current procedures.

Account Number \_\_\_\_\_

Minor's Name (Last, First, MI): \_\_\_\_\_

Minor's Date of Birth (mm/dd/yyyy): \_\_\_\_\_

Minor's Tax Identification Number: \_\_\_\_\_

Statement of Identification

I, \_\_\_\_\_, verify the identity of the above-named minor child.

- Your relationship to minor: [ ] Parent [ ] Legal Guardian [ ] Grandparent [ ] Sibling [ ] Aunt/Uncle [ ] Cousin

I declare under penalty of perjury that all statements made in this document are true and correct.

Signature of Relative/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

Statement of Notary Public

City/County of \_\_\_\_\_ Commonwealth of Virginia

The foregoing instrument was subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_.

Notary Public
Notary Registration number: \_\_\_\_\_
My commission expires: \_\_\_\_\_

Identification Presented [ ] Driver's License/State ID [ ] Passport [ ] Military ID
by Relative/Legal Guardian: [ ] Other (specify) \_\_\_\_\_
Issued by: \_\_\_\_\_ Number: \_\_\_\_\_

Credit Union Use Only

In the absence of a Notary Public, signature of relative/legal guardian may be verified by a CU Representative. The above "Identification Presented" information must be completed by the CU Representative.

CU Rep. Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_
Date: \_\_\_\_\_ Branch: \_\_\_\_\_