

Youth Membership Application

To open your account(s):

- Mail your application to the address below, Attention: New Accounts Department or
- Visit a branch or
- Fax your application to 703-234-6710

If you are returning this form by mail or fax, please enclose a clear photocopy of the Minor's and any Joint Owner's I.D. Acceptable identification includes an unexpired government-issued I.D. card that contains a photo, unique identification number, signature and your current address. If the Minor does not possess such identification, we will also accept a student I.D. card, Social Security card, or birth certificate. An adult Joint Owner may be required.

Questions?

- Contact the Call Center at the numbers shown below.

Important Information

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What This Means for You: When you open an account, we will ask you for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.



P.O. Box 1229, Herndon, VA 20172
703-709-8900 • 844-709-8900 • Fax: 703-925-5113
www.nwfcu.org

Privacy Policy for Minors

The Northwest Federal Youth Club Accounts are designed for newborns to children age 17. Information collected by the Credit Union will be used to establish the account and may also be used to send, via U.S. postal mail, periodic newsletter mailings and birthday cards. At any time a parent/guardian may contact Northwest Federal and ask that the submitted information no longer be used to contact the child. At NO TIME is the child's information provided to a third party.

Youth Membership Application



A: Primary Owner of Account & Eligibility (Please print)

MEMBERSHIP OF MINORS: If membership is being established by a Minor (an individual under the age of 18), the Minor may request a Northwest Federal account access card and/or Northwest Federal "electronic services" (Telephone Banking/Online Banking), or open a checking account and/or request a FirstCard Visa® Platinum, provided that a responsible adult is Joint Owner on the account. The adult Joint Owner is responsible for the Minor's actions regarding the use of any of the aforementioned services and indemnifies and holds harmless Northwest Federal from any such use.

Name (First, MI, Last) _____
Address (cannot be a P.O. box) _____
City, State, ZIP _____
Mailing Address (if different from residence) _____
City, State, ZIP _____
Home Phone _____ Work Phone _____
Mobile Phone _____ Email Address _____
SSN (TIN if applicable) _____ Birthdate _____ (mm/dd/yyyy)
Full Driver's License Number _____ State _____
Other Form of Identification _____
I.D. Issue Date _____ I.D. Expiration Date _____
Employer _____ Occupation _____
I am a: U.S. Citizen Permanent Resident Alien Non Resident Alien

I am eligible to join in one of the following ways:

- Employee of the Agency (please provide your AIN: _____)
 Employee of an Agency Contractor _____
 Through my Employer or Organization _____
 Immediate Family or Household Member:
Member Name _____ Relationship _____
SSN/TIN _____ or Day Phone _____

How did you hear about Northwest Federal?

- Radio Mail YouTube Event Referral Other _____

Please provide any other comments or specific channels _____

B: Services Desired Choose your Northwest Federal services by checking the appropriate boxes below.

- Primary Savings Account** (required for membership, with a \$1 minimum deposit)
 Membership in Youth Club (based on Minor's age; ask for your new member packet with gift)
 ATM Card (parental signature required for members under 18)
 Issue ATM Card to Joint Owner(s) on Account (cards will be issued for all Joint Owners if selected)
 Checking Account (adult Joint Owner required)
 Choice Elite Kasasa Cash® Kasasa Cash Back®
 with Kasasa Saver® with Kasasa Saver®
 ATM/Debit Mastercard® (parental signature required for members under 18)
 Issue ATM/Debit Mastercard® to Joint Owner(s) on Account (cards will be issued for all Joint Owners if selected)
Overdraft Protection (select overdraft source(s))
 Primary Savings Account Money Market Account
 Kasasa Saver® Member Protection Plan*:
 Secondary Savings Account (separate form; fee applies) Standard Limited
*If Member Protection Plan is selected, it will be the last overdraft source.

- FREE Online Banking**
 FREE Online eStatement Access
 FREE Nationwide Shared Branch Access (5,000+ locations in the U.S.)
 Secondary Savings Account
 Savings Club Account
 Money Market Account

C: Joint Owner or Beneficiary Northwest Federal may limit transactions conducted by Joint Owner

(Joint Owners are not eligible for the full privileges of membership. Individual or Entity listed will be added to all Savings and Checking accounts listed for this member number, now and in the future, with the exception of IRAs, unless indicated otherwise.)

Joint Owner or Beneficiary #1 (First, MI, Last) _____
Address (cannot be P.O. box) _____
City, State, ZIP _____
Home Phone _____ Work Phone _____
SSN/TIN _____ Birthdate _____ (mm/dd/yyyy)
Relationship to Minor _____
Occupation _____
Full Driver's License Number _____ State _____
Driver's License Issue Date _____ Exp. Date _____
Exclude Individual or Entity from _____ account.
I am a: U.S. Citizen Permanent Resident Alien Non Resident Alien

Joint Owner or Beneficiary #2 (First, MI, Last) _____
Address (cannot be P.O. box) _____
City, State, ZIP _____
Home Phone _____ Work Phone _____
SSN/TIN _____ Birthdate _____ (mm/dd/yyyy)
Relationship to Minor _____
Occupation _____
Full Driver's License Number _____ State _____
Driver's License Issue Date _____ Exp. Date _____
Exclude Individual or Entity from _____ account.
I am a: U.S. Citizen Permanent Resident Alien Non Resident Alien

D: SSN/Taxpayer Identification Number (TIN) Certification and backup withholding information

- Under penalties of perjury, I certify that: (1) the Social Security Number (SSN)/Taxpayer Identification Number (TIN) listed above is my correct taxpayer identification number (or I am waiting for one to be issued); and (2) I am not subject to backup withholding because (a) I am exempt, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) because the IRS has notified me that I am no longer subject to backup withholding; and (3) I am a U.S. citizen or other U.S. person. For federal tax purposes, you are considered a U.S. person if you are: an individual who is a U.S. citizen or U.S. resident alien; a partnership, corporation, company, or association created or organized in the United States or under the laws of the United States; an estate (other than a foreign estate); or a domestic trust (as defined in Regulations section 301.7701-7).
 I am subject to backup withholding I am not a U.S. person; for income tax purposes I must complete a W-8BEN.

E: Security Interest

I hereby grant Northwest Federal a security interest in all shares and dividends on deposit, now and hereafter, in all accounts I own (including joint accounts) to secure any and all of my indebtedness or obligations to Northwest Federal (except loans secured by real estate), now and hereafter, including debts incurred by credit card. Funds in my Individual Retirement Account are excluded from this security interest. Northwest Federal may enforce this security interest without prior notice.

Initials _____ Initials _____ Initials _____

F: Signature(s) Please include clear copy of photo I.D.

I/We hereby certify eligibility for membership and make application for membership in and agree to be bound by and conform to the by-laws, rules, regulations and policies now in effect and as amended or adopted in the future by Northwest Federal. I/We authorize Northwest Federal to obtain a consumer credit report in establishing this account or other related financial services as submitted now or in the future. By signing below, I/we certify that all the information on this Application is true and correct under penalty of perjury and acknowledge receipt of the Account Agreements & Disclosures, Funds Transfer Agreement and Fee Schedule.

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

Primary Owner Signature **X** _____ Date _____

Joint Owner #1 Signature **X** _____ Date _____

Joint Owner #2 Signature **X** _____ Date _____

Credit Union Use Only

<input type="checkbox"/> New	Account # _____	Savings Acct # _____	Debit Mastercard® # (1) _____
<input type="checkbox"/> Reopen	<input type="checkbox"/> Previous Name _____	Checking Acct # _____	Debit Mastercard® # (2) _____
<input type="checkbox"/> ID Scanned	CU Representative _____	Money Market Acct # _____	ATM Card # (1) _____
<input type="checkbox"/> ID Attached	Branch _____ Date _____	Club Acct # _____	ATM Card # (2) _____
Type of Secondary ID Reviewed _____			