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 703-925-5113

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.
**Youth Membership Application**

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

<table>
<thead>
<tr>
<th>Name (First, M.I., Last)</th>
<th>Address (cannot be a P.O. box)</th>
<th>City, State, ZIP</th>
<th>Mailing Address (if different from residence)</th>
<th>City, State, ZIP</th>
<th>Home Phone</th>
<th>Work Phone</th>
<th>Mobile Phone</th>
<th>Email Address</th>
<th>SSN (TIN if applicable)</th>
<th>Birthdate</th>
<th>(mm/dd/yyyy)</th>
<th>Full Driver’s License Number</th>
<th>State</th>
<th>Other Form of Identification</th>
<th>I.D. Issue Date</th>
<th>I.D. Expiration Date</th>
<th>Employer</th>
<th>Occupation</th>
</tr>
</thead>
</table>

**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.

#### 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: ____________________________

### 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®  
  - 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  
  - Secondary Savings Account  
  - Kasasa Saver®  
  - Money Market Account

- **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 #1 or Beneficiary #1

- Name (First, M.I., 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 #2 or Beneficiary #2

- Name (First, M.I., 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.

How did you hear about Northwest Federal?

- Radio  
- Mail  
- YouTube  
- Event  
- Referral  
- Other ________

Please provide any other comments or specific channels ____________________________
E: 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 ____________________________

Joint Owner #1 Signature X _____________________________

Joint Owner #2 Signature X _____________________________

Date.

Date.

Date.

Credit Union Use Only

☐ New Account # __________________________

☐ Reopen Previous Name _______________________

☐ ID Scanned CU Representative ___________________

☐ ID Attached Branch ___________________________ Date ________

☐ Type of Secondary ID Reviewed _______________________

☐ Savings Acct # ____________________________

☐ Checking Acct # ____________________________

☐ Money Market Acct # __________________________

☐ Club Acct # ____________________________

☐ Debit Mastercard® # (1) _______________________

☐ Debit Mastercard® # (2) _______________________

☐ ATM Card # (1) ____________________________

☐ ATM Card # (2) ____________________________

Primary Owner Signature X 

Date _________________________________________

Joint Owner #1 Signature X 

Date _________________________________________

Joint Owner #2 Signature X 

Date _________________________________________

Type of Secondary ID Reviewed _______________________

X

X

X