

**HI-LAND CREDIT UNION  
CREDIT UNION ACCOUNT CARD AND MEMBERSHIP AGREEMENT**

Account Number: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Telephone: \_\_\_\_\_ Telephone: \_\_\_\_\_

Wk/Cell: \_\_\_\_\_ / \_\_\_\_\_ Wk/Cell: \_\_\_\_\_ / \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_ Mother's Maiden Name: \_\_\_\_\_

SS or Tax Id No. \_\_\_\_\_ SS or Tax Id No. \_\_\_\_\_

Driver's License No. \_\_\_\_\_ Driver's License No. \_\_\_\_\_

Ownership:  Joint Tenants with Rights of Survivorship  Individual  
 Share Account  Share Draft  Other

Payable on Death to: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

**TIN CERTIFICATION AND BACKUP WITHHOLDING INFORMATION**

By signing below, I certify, in accordance with the IRS W-9 instructions provided by the Credit Union and under penalties of perjury, that the Social Security number (SSN)/Taxpayer identification number (TIN) shown is my/the correct identification number and that I am NOT, unless designated below, subject to backup withholding because I have not been notified that I am subject to backup withholding as a result of a failure to report all dividends or interest, or because the IRS has notified me that I am no longer subject to backup withholding.

I am subject to backup withholding  I am not a United States citizen or resident

Exempt (complete W-8 form)

I/we agree to the terms of this Agreement including the terms on the reverse side.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

See important terms on reverse side