



New Account Application

Please print out and complete the following application, have the applicant(s) signature(s) notarized, and mail along with a copy of a valid picture ID of all account applicants to: MidUSA Credit Union, Attn: New Accounts, 3600 Towne Blvd., Middletown, Ohio 45005

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT IN REGARDS TO THE USA PATRIOT ACT: 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 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.



Primary Member Name	Date	Account Number
Share Accounts: <input type="checkbox"/> Prime Share <input type="checkbox"/> Select Share <input type="checkbox"/> Christmas Club	Checking Accounts: <input type="checkbox"/> E-Checking <input type="checkbox"/> Value Checking <input type="checkbox"/> Preferred Checking <input type="checkbox"/> Classic Checking	Electronic Access Services: <input type="checkbox"/> Online Banking <input type="checkbox"/> Debit/ATM Card <input type="checkbox"/> TellerPhone
Overdraft Protection for Checking Account (Please select one and initial): <input type="checkbox"/> Main Share Only <input type="checkbox"/> First Line of Credit* then Main Share <input type="checkbox"/> No Overdraft Protection <input type="checkbox"/> Line of Credit Only* <input type="checkbox"/> First Main Share, then Line of Credit*		
<i>*Additional application and/or approval required.</i>		Initial: _____

Primary Member Information	
Name	Social Security Number
Address	City, State, Zip
Daytime Phone ()	Evening Phone ()
Employer	Employer Address
Best Time to Call	e-mail Address

Joint Member #1	Social Security Number
Name	Date of Birth
Address	City, State, Zip
Daytime Phone ()	Evening Phone ()
Joint On:	
Share Accounts: <input type="checkbox"/> Main Share Account (required for all members) <input type="checkbox"/> Prime Share <input type="checkbox"/> Select Share <input type="checkbox"/> Christmas Club	Checking Accounts: <input type="checkbox"/> E-Checking <input type="checkbox"/> Value Checking <input type="checkbox"/> Preferred Checking <input type="checkbox"/> Classic Checking



New Account Application

Joint Member #2	Social Security Number
Name	Date of Birth
Address	City, State, Zip
Daytime Phone ()	Evening Phone ()
Joint On:	
Share Accounts: <input type="checkbox"/> Main Share Account (required for all members) <input type="checkbox"/> Prime Share <input type="checkbox"/> Select Share <input type="checkbox"/> Christmas Club	Checking Accounts: <input type="checkbox"/> E-Checking <input type="checkbox"/> Value Checking <input type="checkbox"/> Preferred Checking <input type="checkbox"/> Classic Checking

Joint Share Account Agreement – Not Transferable

MidUSA Credit Union is hereby authorized to recognize any of the signatures subscribed hereto in the payment of funds or the transaction of any business for this account. The joint owners of this account hereby agree with each other and with said Credit Union that all sums now paid in on shares (also referred to as Savings), or heretofore or hereafter paid in on shares by any or all of said joint owners with all accumulations thereon, are and shall be owned by them and be subject to the withdrawal or receipt of any of them, and payment to any of them or the survivors shall be valid and discharge said Credit Union from any liability for such payment. Any or all of said joint owners may pledge all or any part of the shares in this account as collateral security to a loan or loans. The right or authority of the Credit Union under this agreement shall not be changed or terminated by said owners, or any of them, except by written notice to said Credit Union, which shall not affect transactions theretofore made.

 Joint Member #1 Signature Date _____

 Joint Member #2 Signature Date _____

Account Agreement and Authorization

The undersigned hereby authorized MidUSA Credit Union, Inc. (the "Credit Union") to establish this account. The Credit Union is hereby authorized to recognize the signature(s) subscribed hereto in the payment of funds or the transaction of any business for this account. The undersigned agrees to allow the Credit Union to obtain periodic credit reports. The right or authority of the Credit Union under this agreement shall not be changed or terminated by the undersigned except by written notice to the Credit Union, which shall not affect transactions theretofore made. The undersigned acknowledges that he or she received a copy of the terms and conditions of the Important Account Information disclosures and General Fee Schedules applicable to the account and services requested.

 Primary Member Signature **Date** _____

 Joint Member #1 Signature **Date** _____

 Joint Member #2 Signature **Date** _____

Credit Union Use Only		
Branch Code		ID State
Action Taken: <input type="checkbox"/> New Account <input type="checkbox"/> Add Joint <input type="checkbox"/> Drop Joint <input type="checkbox"/> Name Change	Chex Systems: <input type="checkbox"/> Record <input type="checkbox"/> No Record	U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No
Employee Initials:	Date Entered:	Teller #