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Account Update Form

Member Name (Print) _____ Account No. _____

I hereby make application for the account(s) indicated below and agree that the account(s) is/are subject to the terms of the Invitation to Join/Signature Card. I understand and agree that the account(s) indicated below are owned by any joint owner(s) set forth on the Invitation to Join/Signature Card. I agree to conform to your bylaws as well as all applicable terms and conditions set forth in the Truth in Savings Disclosure, the Certificate Account Agreement and Disclosure (if applicable), and Electronic Services Disclosure and Agreement (receipt of which is hereby acknowledged and which is incorporated by the reference).

Share Draft (Checking) Account (\$25 minimum deposit) Secure Checking Simpli Checking Debit Card Additional Card for Joint Owner

SHARE DRAFT (CHECKING)/OVERDRAFT OPTIONS

Overdraft can be covered in two different ways or combinations thereof. They are: 1) A transfer from my savings account, with not more than a total of six transfers in any calendar month, regardless of source of transfer, or 2) An advance from my Line of Credit, upon approval of credit and subject to terms and conditions of that account, up to my credit limit. If this option is selected loan application must be completed (check only one box).

SAVINGS ONLY LINE OF CREDIT ONLY NO OVERDRAFT

ADDING JOINT OWNER

If you did not originally have a joint owner and you wish to add a Joint Owner to all your account(s) please complete the information below. Both the primary member and new joint owner must sign at bottom.

Important Information About Procedures for Opening a New Account: 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 me: When I open an account, you will ask for my name, address, date of birth, and other information that will allow you to identify me. You may also ask to see my driver's license or other identifying documents. (Include I.D. copy)

Joint Owner Name _____ Date of Birth _____ Driver License No. _____ Mother's Maiden Name _____

Home Address _____ (_____) Home Phone _____ (_____) Work Phone _____

E-mail Address _____ Social Security No. _____ Employer _____ Occupation _____

Joint Owner Name 2 _____ Date of Birth _____ Driver License No. _____ Mother's Maiden Name _____

Home Address _____ (_____) Home Phone _____ (_____) Work Phone _____

E-mail Address _____ Social Security No. _____ Employer _____ Occupation _____

ADDING/CHANGING BENEFICIARY

If you as primary owner would like to add/change a beneficiary, please complete the information below and sign below where indicated.

BENEFICIARY(IES) in the event of my death, or if there is more than one owner of this account, in the event of death of all the owners, the owner(s) hereby designate as my/our beneficiary(ies) to receive all sums in my/our account(s).

Beneficiary Name Add Delete Relationship (_____) Phone Number

Address _____ Social Security No. _____ Date of Birth _____

Email Address _____

Beneficiary Name 2 Add Delete Relationship (_____) Phone Number

Address _____ Social Security No. _____ Date of Birth _____

Email Address _____

PRIMARY & JOINT SIGNATURES

X _____ Date _____ **X** _____ Date _____
 Primary Owner Signature New Joint Owner Signature (If Applicable)

X _____ Date _____
 New Joint Owner Signature (If Applicable)

CREDIT UNION USE ONLY Officer Signature _____ Date: _____

OPENED/ORDERED BY DATE OPENED/ORDERED BY DATE

SHARE DRAFT (CHECKING) _____ OFAC VERIFICATION _____

CHEXSYSTEMS _____ DEBIT CARD _____