

How to Join Pittsford Federal Credit Union

Membership* is easy, just follow these steps:

1. If you live, work, worship, volunteer, or attend school in the town or village of Pittsford, Mendon, Honeoye Falls, Lima, Avon, Brighton, East Rochester, Henrietta, Perinton, Rush, East or West Bloomfield and Victor, or you're an immediate relative or permanent household member of a current or eligible member, simply complete and sign the enclosed membership application. **(If your account will have a joint owner, complete both member sections.)**
2. Indicate the account type you wish to open and the service(s) you would like.
3. **Enclose a check for at least \$5.00 made payable to the account owner.** (Please allow 7-10 days for processing check orders and ATM/Debit Card requests.)
4. Enclose a photocopy of one (1) valid form of identification for each member enrolling.
 - ◆ Driver's License
 - ◆ Passport
 - ◆ Non-Driver License ID
 - ◆ U.S. Military ID
 - ◆ New York State Pistol Permit
5. Bring to any Pittsford Federal Credit Union branch or mail to:

Pittsford Federal Credit Union
P.O. Box 346
Pittsford, NY 14534
6. Take advantage of our many convenient services. And keep in mind, **once a member, always a member** – as long as you maintain a minimum share or share draft balance of \$5.00 you can remain a member – *even if you change jobs, move, or retire.*

*Membership is subject to eligibility.

Authorization & Certification of Tax ID# and Backup Withholding:

By signing this membership application, I/we hereby make application for membership in the Pittsford Federal Credit Union, and agree to conform to the bylaws and amendments thereof. I/we also agree to the terms and conditions of the Membership and Account Agreement, Funds Availability Policy, Truth-in Savings Disclosure provided to us, and to any amendment you make from time to time. I/we authorize the Credit Union to verify credit, account and employment history as needed. I/we acknowledge receipt of a copy of the Agreements and Disclosures applicable to the accounts and services requested. All new accounts are verified by ChexSystems.

The Internal Revenue Service does not require your consent to any provision of this documentation other than the certifications required to avoid backup withholding. Under the penalties of perjury, I certify (1) that the number shown on this signature card is my correct taxpayer identification number (2) that I am not subject to backup withholding because (A) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of failure to report all interest or dividends, or (B) the IRS has notified me that I am no longer subject to backup withholding, and (3) I am a U.S. person (including a U.S. Resident Alien).

624-7474 or (800) 836-8010

PittsfordFCU.org/apply

Pittsford Branch

20 Tobey Village Rd.

(Mortgage Department located here)

Mendon Branch

1321 Pittsford Mendon Rd.

Hours

Monday - Thursday 9 a.m. - 4:30 p.m.
Friday 9 a.m. - 5:30 p.m.

Join today at

PittsfordFCU.org

Membership Application



“Pittsford Federal Credit Union came through for us right away.”

~ Ken & Carolyn of Rochester, N.Y.,
Members since 2013



Pittsford

FEDERAL CREDIT UNION

Where You Belong — Financially

Primary Member Information

I am eligible to open an account with Pittsford Federal Credit Union for the following reason:

- I am currently a member. Member ID _____
- I live, work, worship, volunteer or attend school in a qualifying town or village (see Item 1 in **How to Join**).
- I am an immediate relative or permanent household member of a current or eligible member.

His/her name _____

Name _____

Address _____

City _____

State _____ Zip _____

Social Security # _____

Date of Birth _____

Primary

Home Phone _____

Work Phone _____

Mobile Phone _____

Email _____

Employer _____

Photo ID#* _____ State Issued _____

Issue Date _____ Expires _____

How you heard about us _____

Joint Member Information

I am eligible to open an account with Pittsford Federal Credit Union for the following reason:

- I am currently a member. Member ID _____
- I live, work, worship, volunteer or attend school in a qualifying town or village (see Item 1 in How to Join).
- I am an immediate relative or permanent household member of a current or eligible member.

His/her name _____

Name _____

Address _____

City _____

State _____ Zip _____

Social Security # _____

Date of Birth _____

Primary

Home Phone _____

Work Phone _____

Mobile Phone _____

Email _____

Employer _____

Photo ID#* _____ State Issued _____

Issue Date _____ Expires _____

*Photocopy of ID required

Type of Account(s) You Are Opening

Super Savings

Checking – Your first order of standard checks is free!

Totten Trust Account Designation

Account(s) will be designated as Totten Trust. Funds are payable equally to each beneficiary listed below upon death of all account owners.

Beneficiary Name _____

Address _____

City/State/Zip _____

Social Security # _____

Date of Birth _____

Beneficiary Name _____

Address _____

City/State/Zip _____

Social Security # _____

Date of Birth _____

(List additional beneficiary information on separate sheet.)

Custodial Savings Account

This account will be designated as a custodial account under the New York Uniform Transfer to Minors Act (UTTMA).

Minor's Name _____

Minor's Social Security # _____

Minor's Date of Birth _____

Successor Custodian Name _____

Successor's Social Security # _____

Successor's Date of Birth _____

I/we agree to the conditions on the reverse side of this application. Account(s) will be opened in the name(s) of all members who sign this form.

X _____

Primary Member Signature

Date

X _____

Joint Member Signature

Date

FOR CREDIT UNION USE ONLY:

Account(s) Opened _____ Opened By _____ Approved By _____ Date _____

FOR CREDIT UNION USE ONLY:

	P	J		P	J
eAlerts	<input type="checkbox"/>	<input type="checkbox"/>	eFunds	<input type="checkbox"/>	<input type="checkbox"/>
eStatements	<input type="checkbox"/>	<input type="checkbox"/>	Direct Deposit	<input type="checkbox"/>	<input type="checkbox"/>
Combine Statement	<input type="checkbox"/>	<input type="checkbox"/>	Audio Pin Setup	<input type="checkbox"/>	<input type="checkbox"/>
Checks Ordered	<input type="checkbox"/>	<input type="checkbox"/>	ATM/Debit Card Order/PIN	<input type="checkbox"/>	<input type="checkbox"/>
Overdraft Setup	<input type="checkbox"/>	<input type="checkbox"/>	New Account & DD Letter	<input type="checkbox"/>	<input type="checkbox"/>