

## **Membership Application Instructions:**

Thank you for your interest in becoming a Member of the Pitney Bowes Employees Federal Credit Union. Attached is our Membership Application for you to review. Please fill out the application in its entirety and sign and date the application.

Include a minimum \$50 opening balance check made payable to PBEFCU, a form of ID (see Membership Form for specific ID requirements) and MAIL to:

Pitney Bowes Employees Federal Credit Union ATTN: Member Services 27 Waterview Drive (27-1A) Shelton, CT 06484

Thank you and let us know if you have any questions or need assistance filling out the paperwork.

### **Pitney Bowes Employees Federal Credit Union**

27 Waterview Drive (27-1A) Shelton, CT 06484



# The Credit Union's Family Membership \$25 Promotion

This coupon is worth \$25 in addition to the minimum opening balance of \$50 in the new Family Member's Savings Account. For every Family Member that joins the Credit Union, the referring Member will also receive \$25. The account must remain open for a minimum of 90 days or the bonus dollars will be forfeited. Only one coupon permitted for each new account. This is a limited time offer. Some Restrictions apply. The Credit Union may terminate this promotion at any time.

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#### **Dear Valued Member:**

Did you know that your **Family Members** can also become a member of the Credit Union?

If your family member becomes a member of the Credit Union, <u>they will receive \$25</u> in their account once they've deposited a minimum of \$50 into their new Savings Account at Pitney Bowes Employees Federal Credit Union <u>PLUS you will receive \$25</u> for referring your Family Member!

To begin we just need the following information:

Name of Family Member:		Date:			
The Applicant					
	☐ Spouse	☐ Aunt			
	☐ Child	☐ Uncle			
	$\square$ Parent	☐ Niece			
	☐ Sibling	☐ Nephew			
	$\square$ Grandparent	☐ Stepchild			
	$\square$ Grandchild	☐ Stepsibling			
	$\square$ Stepparent	$\square$ Adoptive Relationship			
	☐ Household Member				
I certify the	at the above applicant is re	elated to me or is a household member.			
Member Name:		Member Signature:			
Member Number:		For sodige billed a marchin of an action All			





# Pitney Bowes Employees Federal Credit Union Membership/Savings/Checking Application

Member/Owner:					Date of Birth:		
Address, City, State, Zip:							
Soc Sec No:	Employer:	Employer:			ID #:		
Home Phone:	Work Phone:	Work Phone:			Mobile Phone:		
Driver's License No:		State:			Expiration:		
Email:							
Joint Owner:			Date o			of Birth:	
Address, City, State, Zip:				ı			
Soc Sec No:	Employer:					ID #:	
Home Phone:	Work Phone:	hone:			Mobile Phone:		
Driver's License No:		State:			Expiration:		
Email:							
U.S. citizen ID card (Form 1-197) ID Card for use of Resident Citizen in a ID Card issued by federal, state or locors (under 18 years of age) are not require we are not subject to backup withholdi	n this Primary List (Photostate or possession of the h (unexpired)  expired)  gistrations Receipt Card (Foial Security Administration cate issued by a state, courthe United States (Form 1-1al government agencies or d to present identification sing because (a) I/We have a dividends, or (b) the IRS have a dividends.	orm I-551)  orty, municipa  179)  entities, provice the account  not been not	laundering to obtain, version who you open a birth, and one of ID/do	activitie verify, a popens on account other in ocumer or outly cains a p ot with a IRS tha	es, Fede nd reco an acco unt, we formati ntation	session of the United States with official s	
a c.c. person (melaumig a resident uni			and condition	nc cont	tainad i	n the Membership and Assount Agreem	
signing this application each of you joi	ntly and severally agrees to	o the terms a	ina conantic	iis com	tailleu i	ii the Membership and Account Agreeme	