

<div style="background-color: #f2f2f2; padding: 2px;">1. Primary Account Owner Information</div> <p>Full name _____</p> <p>Home address _____</p> <p>City, State, Zip _____</p> <p>Home phone (____) _____ Date of birth _____</p> <p>Work phone (____) _____ SSN/TIN _____</p> <p>Email address _____</p> <p>Mother's maiden name _____</p> <p>Driver's license number _____ State issued _____</p> <p>Employer _____ Years employed _____</p> <p>Position/title _____ <input type="radio"/> Full time <input type="radio"/> Part time / #Hours _____</p> <p>Employment income <input type="radio"/> Gross monthly wage/salary \$ _____ <input type="radio"/> Net monthly \$ _____</p> <p>Home <input type="radio"/> Own <input type="radio"/> Rent/years _____ Monthly payment _____</p>	<div style="background-color: #f2f2f2; padding: 2px;">4. Type of Account</div> <p>Select type of savings account <input checked="" type="checkbox"/> Share Savings</p> <p><input type="radio"/> Young Savers <input type="radio"/> IRA</p> <p><input type="radio"/> Vacation Club <input type="radio"/> Money Market</p> <p><input type="radio"/> Holiday Club <input type="radio"/> Summer Savings</p> <p><input type="radio"/> Other _____</p> <p>Select type of checking account</p> <p><input type="radio"/> Basic Checking <input type="radio"/> Interest Checking</p> <p><input type="radio"/> Student Checking <input type="radio"/> Senior Checking</p>
<div style="background-color: #f2f2f2; padding: 2px;">2. Membership Eligibility <small>Full listing available at www.cunj.org</small></div> <p>How are you eligible to join Credit Union of New Jersey?</p> <p><input type="radio"/> I am an employee of the State of New Jersey</p> <p><input type="radio"/> I live, work, worship or attend school in Ewing, NJ</p> <p><input type="radio"/> I am an employee of Educational Testing Service</p> <p><input type="radio"/> I live in a Primary Metropolitan Statistical Area such as Trenton or Burlington County</p> <p><input type="radio"/> My employer belongs to a participating Chamber of Commerce</p> <p><input type="radio"/> I am an employee or member of a select group Employer or Association name _____</p> <p><input type="radio"/> I am related to a member of Credit Union of New Jersey Relatives name _____</p> <p><input type="radio"/> Other _____</p>	<div style="background-color: #f2f2f2; padding: 2px;">5. Account Services</div> <p>Select Services:</p> <p><input type="radio"/> Direct Deposit <input type="radio"/> Debit Card</p> <p><input type="radio"/> Payroll Deduction <input type="radio"/> ATM Card</p> <p><input type="radio"/> Overdraft Protection <input type="radio"/> e-Statements</p> <p><input type="radio"/> Internet Banking <input type="radio"/> Touch Tone Teller</p>
<div style="background-color: #f2f2f2; padding: 2px;">3. Joint Account Owner Information</div> <p>Full name _____</p> <p>Home address _____</p> <p>City, State, Zip _____</p> <p>Home phone (____) _____ Date of birth _____</p> <p>Work phone (____) _____ SSN/TIN _____</p> <p>Email address _____</p> <p>Mother's maiden name _____</p> <p>Driver's license number _____ State issued _____</p> <p>Employer _____ Years employed _____</p> <p>Position/title _____ <input type="radio"/> Full time <input type="radio"/> Part time / #Hours _____</p> <p>Employment income <input type="radio"/> Gross monthly wage/salary \$ _____ <input type="radio"/> Net monthly \$ _____</p> <p>Home <input type="radio"/> Own <input type="radio"/> Rent/years _____ Monthly payment _____</p> <p><small>To add additional account owners, please contact Credit Union of New Jersey to complete an Account Change Card</small></p>	<div style="background-color: #f2f2f2; padding: 2px;">6. Account Designations</div> <p>Select one of the following:</p> <p><input type="radio"/> Individual <input type="radio"/> Joint with survivorship</p> <p><input type="radio"/> Other _____</p> <p><input type="radio"/> Payable on Death (POD)/In Trust For</p> <p><input type="radio"/> All Accounts</p> <p><input type="radio"/> Designate specific account(s) _____</p> <p>Beneficiary/POD Payee #1 _____</p> <p>Street _____</p> <p>City, State, Zip _____</p> <p>Beneficiary/POD Payee #2 _____</p> <p>Street _____</p> <p>City, State, Zip _____</p> <p><input type="radio"/> UTTMA/UGMA (As custodian for: _____ (minor) under the Uniform Transfers/Gifts to Minors Act)</p> <p><input type="radio"/> Minor's Social Security # _____</p>
<div style="background-color: #f2f2f2; padding: 2px;">Important Information</div> <p>Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account to help the government fight the funding of terrorism and money laundering activities. 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. By submitting this application, you authorize the Credit Union to obtain information necessary to verify your identity. This may include information obtained from consumer reporting agencies, public databases, or other sources. If the Credit Union is unable to verify information you provide, an account may not be opened. The Credit Union reserves the right to close your account if it determines at a later date that it does not know your true identity.</p>	

7. Initial Deposit

Indicate the total amount of your initial deposit

\$5 \$25 \$50 \$100 Other _____

How do you want this amount deposited into your account?

You must deposit at least a \$5.00 share into your savings account.

Enclose a check or money order.

Savings \$ _____

Checking \$ _____

8. Loan Options

I'm interested in saving money. I'd like to apply for:

- Auto Loan (New or Used)
- Home Equity Loan
- First Mortgage
- Credit Card
- Personal Loan
- Student Loan
- Refinance Current Loan
- Type of loan _____
- Balance \$ _____

9. Electronic Statement Notification

Your account statements are stored and available via the internet through Internet Banking. Each month we will e-mail you when your statement is ready to be viewed. No account information is attached to this monthly notification for your protection. To view your statement, you must log on to Internet Banking using your account number and access code. Any member communication items that would be included with your statement will also be sent to you electronically.

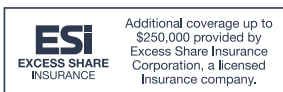
Please provide your e-mail address in Section 1 and keep it updated so that you do not receive a monthly \$6 bad address fee for returned e-mails. To update your e-mail, simply notify CUNJ at memberservices@cunj.org. Paper copies of past statements are available by contacting CUNJ. There is a \$5 fee per statement copy for statements older than 6 months. Members are able to print statements through Internet Banking using Internet Explorer for free. To view your statements, you will need to use **Adobe Acrobat Reader**. This software can be downloaded for free by visiting www.adobe.com. Statement copies can be downloaded to your PC with 1 MB of storage space.

You may change your statement options at any time. You will not receive paper statements in the mail unless you choose the option below.

I wish to receive paper statements in the mail instead of an e-mail notification when my statement is ready to be viewed online.

Mail completed applications to:

Credit Union of New Jersey
 ATTN: Member Service
 P.O. Box 7921
 Ewing, NJ 08628



10. TIN Certification and Backup Withholding Information

Under penalties of perjury, I certify that:

- (1) The number shown on this form is my correct taxpayer identification number,
- (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) 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).

Certification Instructions:

Cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. Cross out item 3 and complete a W-8 BEN if you are not a U.S. person.

11. Signature

All of the terms, conditions, form of account ownership, account selection and other information indicated on this card apply to all of the accounts listed unless the Credit Union is notified in writing of a change. By signing below, you certify that the information on this Membership Application (front and back) is complete, true and submitted for the purpose of obtaining the accounts and services requested. You agree: (a) that the Credit Union can use credit reporting agencies or otherwise verify the information on this Membership Application for the purpose of extending credit or services to you or reviewing or collecting a credit account of yours; (b) that the Credit Union can tell others about its credit experience with you and obtain information from others about your credit history and performance. If you request, the Credit Union will tell you the name and address of any credit reporting agency from which it received a credit report on you. By signing below, you acknowledge that you have received, read and agree to the terms of the following Agreements applicable to the accounts and services requested.

- **Membership and Account Agreement.** You acknowledge receipt of and agree to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Rate and Fee Schedule, Funds Availability Policy Disclosure, if applicable, and to any amendment the Credit Union makes from time to time which are incorporated herein.
- **Overdraft Loan Agreement.** If an Overdraft Loan Account is requested and provided, you acknowledge receipt of and agree to the terms of the Overdraft Loan Agreement and Truth in Lending Disclosure.
- **Credit Card Agreement.** If a Credit Card Account is requested and provided to you, you acknowledge receipt of and agree to the terms of the Credit Card Agreement which governs your Credit Card account.
- **Electronic Funds Transfer Agreement.** If an access card or Electronic Funds Transfer Service is requested and provided, you acknowledge receipt of and agree to the terms of the Electronic Funds Transfer Agreement.

The Internal Revenue Service does not require your consent to any provision of this Membership Application other than the certifications required to avoid backup withholding.

✗ _____
 Signature Date

✗ _____
 Signature Date

For Credit Union Use Only — Member Verification

Type of Identification	Identification #	ID Issuance (State/County)	Issuance Date	ID Expiration Date
<input type="radio"/> Drivers License	_____	_____	_____	_____
<input type="radio"/> Passport	_____	_____	_____	_____
<input type="radio"/> Alien ID	_____	_____	_____	_____
<input type="radio"/> Other	_____	_____	_____	_____
<input type="radio"/> Credit Report	_____	_____	_____	_____

Chex System _____
 OFAC _____
 Membership Verification _____
 Opened by _____
 Date _____
 Teller Number _____
 Loan Officer ID _____