Administrative Offices
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Credit Union of New Jersey
A Federal Credit Union

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HOUSEHOLDING CONSENT FOR RELATIONSHIP REWARDS PROGRAM

The Relationship Rewards Program rewards members who maintain specified combined account and loan balances with Credit Union of New Jersey. Possible rewards may include fee waivers, lower rates on loans, or other benefits the Credit Union determines. Specific available rewards may vary from time to time.

"Householding" allows for households where two or more Credit Union of New Jersey members reside to combine their balances for purposes of determining eligibility for the Relationship Rewards program. If Credit Union of New Jersey members living at your address agree to household balances, each member who resides in your household will be eligible for the level of Relationship Rewards for which the total account and loan balances at your household qualify you. Example: If a Relationship Rewards free box of checks requires at least $5000 in combined deposit and loan balances, and member A in your household has a $1500 end-of month aggregate balance in April and member B in your household has a $3500 end-of-month aggregate balance, both member A and member B will receive a free box of checks in May. For information about the Relationship Rewards program, please visit CUNJ.org, see a Credit Union of New Jersey representative, contact us at 609-538-4061 x 3410, or visit any Credit Union of New Jersey branch.

All Credit Union of New Jersey members completing this form must reside at the same physical address. Exceptions to this rule are: temporary school address, temporary military address, or temporary job assignment address.

Regardless of householding status, Credit Union of New Jersey will release information only to persons who are owners or authorized signers on accounts or to persons who are obligors on loans. Consent to household will *not* change ownership of any accounts or obligations on any loans. If at any time the Head of Household accountholder discontinues his/her membership with Credit Union of New Jersey and the Additional Household Accountholders wish to continue participation in the householding program, a new Householding Consent form must be completed and submitted to Credit Union of New Jersey. If a new Householding Consent form is not submitted to Credit Union of New Jersey after the Head of Household account is closed, all Additional Household Accounts will be considered their own respective Head of Household accounts. Only the Head of Household accountholder can add or delete Additional Household Accountholders. A new Householding Consent form must be signed by affected parties in order to add or delete Additional Household accounts.

PHYSICAL ADDRESS OF MEMBERS CONSENTING TO HOUSEHOLDING OF ACCOUNTS

Street Address	City	State and Zip Code

MASTER ACCOUNT

Print Member Name	Member Number	Member Signature	Date

ADDITIONAL HOUSEHOLD ACCOUNT(S) (If different physical address, please explain (i.e. temporary school address)).

Print Member Name	Member Number	Member Signature	Date

Street Address	City	State and Zip Code

Print Member Name	Member Number	Member Signature	Date

Street Address	City	State and Zip Code

ADDITIONAL HOUSEHOLD ACCOUNT(S) (If different physical address, please explain (i.e. temporary school address)).

Print Member Name | Member Number | Member Signature | Date

Street Address | City | State and Zip Code

Print Member Name | Member Number | Member Signature | Date

Street Address | City | State and Zip Code

Reason for different address and end date:

By completing this form and submitting it to Credit Union of New Jersey, you request that Credit Union of New Jersey "household," or combine the balances of, the accounts of all members signing above and residing at your physical address for the purpose of determining eligibility for the Credit Union's Relationship Rewards Program.

REMOVAL OF HOUSEHOLD ACCOUNT(S)

MASTER ACCOUNT

Print Member Name | Member Number | Member Signature | Date

Print Member Name | Member Number | Member Signature | Date

Street Address | City | State and Zip Code

Print Member Name | Member Number | Member Signature | Date

Street Address | City | State and Zip Code

CUNJ Staff Use Only Completed By

Date Completed