



CHECKING APPLICATION

General Information:

Primary Owner's Name: _____ SS#: _____ M F

Physical Address:

Street: _____ City: _____

State: _____ ZIP: _____

Mailing Address: Same as Physical Address

Street _____ City: _____

State: _____ ZIP: _____

Cell #: _____ Home #: _____ Work #: _____

Email: _____

Joint Owner's Name: _____ SS#: _____ M F

DOB: _____ ID Type: _____ ID#: _____ ID State: _____

Physical Address:

Street: _____ City: _____

State: _____ ZIP: _____

Mailing Address: Same as Physical Address

Street: _____ City: _____

State: _____ ZIP: _____

Cell #: _____ Home #: _____ Work #: _____

Email: _____

Select a Checking Account and supporting products:

CHECKING ACCOUNTS

- Standard Checking (minimum opening deposit \$25.00)
 Advantage Checking (minimum opening deposit \$25.00)
 Premium Checking (minimum opening deposit \$1,000)
 4U Checking (minimum opening deposit \$25.00)

ISSUE A DEBIT CARD?

- Yes No

OVERDRAFT PROTECTION

- By Share1 By Visa2 Both1&2 None

1 Reg D limits the number of withdrawals and transfers from a savings account to six per month. This includes transactions by phone, online, ACH, and overdraft protection applying to all checking accounts.

2 To sign up for overdraft protection by VISA, you must submit a separate application for an Eagle VISA Credit Card. Ask how to you can apply.

- Yes, I would like my debit card transactions covered under Courtesy Pay3.
 No, I would not like my debit card transactions covered under Courtesy Pay3.

3 Courtesy Pay allows items drawn against your checking account to be paid when the money is not there as detailed in the Master Account Agreement. Normal NSF fees apply.

ELECTRONIC SERVICES

- NetTeller (online banking) iTalk (automated phone service)
 ClickSwitchTM (online deposit & payment tool)
 E-Statements (electronic statements)

AUTHORIZATION & AGREEMENT AND TAXPAYER IDENTIFICATION NUMBER (TIN) CERTIFICATION & BACKUP WITHHOLDING INFORMATION - Signature Required

By signing below, I/We certify that all information herein is true and correct and I/we authorize Eagle Louisiana Federal Credit Union to verify or obtain further information the credit union may deem necessary concerning my credit standing and deposit history. I/we agree to subscribe for at least one (1) share in the Credit Union. I/we acknowledge receipt of and agree to abide by all terms and conditions of the Master Account Agreement, Truth-in-Savings Rate and Fee Schedule, and to any amendment the Credit Union makes from time to time which are incorporated herein. I/we authorize the credit union to obtain credit reports in connection with this application and for any update, renewal, or extension of credit or services and for the purpose of verifying identification in compliance with the USA Patriot Act of 2002. I/We additionally authorize the Credit Union to check my credit report and score to determine if there are loans in which I may qualify for, for cross-selling purposes, and for marketing purposes. In order to comply with the U.S. Patriot Act, effective October 25, 2002, Eagle Louisiana Federal Credit Union is required to verify the identity of members applying for and opening new accounts or services with the credit union. Information we are required to obtain and verify includes name, residential address, tax identification number, and date of birth. Additional data may also be gathered depending on the type of account applied for or opened. The Act requires us to maintain records of the identification verification and periodically update this information. Confidentiality of the information maintained by the credit union will be maintained as required under the Privacy Act.

TIN Certification: Under penalties of perjury, I certify that: 1. The number shown on this form is my correct Taxpayer Identification Number (or I am waiting for a number to be issued to me); and 2. I am not subject to backup withholdings because (a) I am exempt from backup withholdings, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholdings 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 back up withholding; and 3. I am a U.S. citizen or other U.S. person including a U.S. resident alien, a partnership, corporation, company, or association created or organized in the U.S. or under the laws of the U.S., an estate (other than a foreign estate) or domestic trust as defined in Regulation section 301.7701-7; and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.
Exempt payee code (if any) _____
Exemption from FATCA reporting code (if any) _____

Certification instructions:

You must 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. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide the correct TIN.

Cross out item 3 if it does not apply.

Member Signature (Required)

Date

Joint Owner Signature

Date

Joint owners/signers designated above are authorized on all accounts established using this applications. Separate applications must be used to establish different authorities for different accounts.

To be completed by credit union staff.

Member #: _____ Opened by: _____ Date: _____

Card Order:

Was a FACTA done: _____

Address validation by (teller number and initials): _____