

ACCOUNT APPLICATION

Please mail to: Oakland University Credit Union 3777 West Road • PO Box 1208 East Lansing, MI 48826-1208

A \$5.00 minimum deposit ACCOUNT #

into your Grizzly Saver is required to open your account. **SECTION A - ELIGIBILITY** ☐ New Account ☐ Add Joint Party ☐ Add Checking Account

ELIGIBILITY: You must be eligible for membership to open an account. ☐ Faculty, employee, or student of MSU¹ or OU²

☐ Employee or student of Cooley Law School³

☐ Desk Drawer Fund donor⁴

☐ Attended or graduated from MSU or OU

☐ Work on MSU or OU campus and under control of school's governing bodies

 $oldsymbol{\square}$ Employee of Select Employee Group ☐ Immediate family member of eligible group

 $\hfill \square$ Individual living in household of eligible group making up an economic unit

☐ Individuals who live, work, worship, attend school, or have a business located within Oakland,

Genesee, Lapeer, Livingston, or Macomb counties

¹MSU = Michigan State University ²OU = Oakland University ³Cooley Law School = Thomas M. Cooley Law School located in Lansing; Grand Rapids; or Auburn Hills, Michigan ⁴\$10 minimum donation For a complete list of membership eligibility options, please call OU Credit Union or visit oucreditunion.org/whocanjoin

SECTION B			APPI	LICANT INFORMATION						
Citizenship Status U.S. Citizen Resident Alien (permanent resident)			□ Nonresident Alien (temporary resident)							
Name First Middle Last			Physical Address – Street /Apt. ☐ Own ☐ Rent			City			State	ZIP Code
Mailing Address (If different than physical address) – Street/Apt. or PO Box			City					State	ZIP Code	
Mobile Phone* Other Phone*							Mother's Maiden Name			
Date of Birth Social Security No.			Driver's License/Passport or Other Documentation/ID				State of Issue Date of Expiration			ion
Email Address*			Employer/Previous Employer				Date Employed			
Occupation			Employment Status Monthly (Gross Income				
1st Joint Party Information Citize	nship Status 🛭 U.S. Citi	zen 🖵 Reside	nt Alien (permanent resident) Nonresident	Alien (tempora	ry resid	ent)			
Name First Middle	Last		Physical Address – Street/Apt. □ Own □ Rent			City	City State ZIP Code		ZIP Code	
Mailing Address (If different than phy	rsical address) – Street/A	pt. or PO Box	City				State ZIP Code			
Mobile Phone*		Other Phone*					Mother's Maiden Name			
Date of Birth	Social Security No.		Driver's	tion/ID		State of Issue	Date o	of Expirat	ion	
Email Address*			Employer/Previous Employer				Date Employed			
Occupation			Employment Status Monthly Gross Income							
2nd Joint Party Information Citize	nship Status 🚨 U.S. Citi	zen 🗖 Reside	nt Alien (permanent resident) Nonresident	Alien (tempora	ry resid	ent)			
Name First Middle Last			Physical Address – Street/Apt. □ Own □ Rent			City State ZIP Code			ZIP Code	
Mailing Address (If different than phy	vsical address) – Street/A	Apt. or PO Box			City				State	ZIP Code
Mobile Phone* Other Phone*			'				Mother's Maiden Name			
Date of Birth	Social Security No.		Driver's	License/Passport or Other Documenta	tion/ID		State of Issue	Date o	of Expira	tion
Email Address*			Employer/Previous Employer			Date Employed				
Occupation			Employment Status Mon			onthly (nthly Gross Income			
*You authorize us to contact you, including by electronic or automated means, such as emails, autodialed and prerecorded calls, and text messages.										
SECTION C				INT SERVICE SELECTION	N					
By checking below, I/we	agree to apply f	or/request	the s							
Checking Options				Savings Options			S	ervi	ces	
24/7 access, free ATM access, free Bill Payment, direct deposit, eStatements, and quarterly FICO® Scores*			Savings Builder SM — Reverse-tiered account (lower balances earn higher dividends) Checking				ower	eStatements		
☐ TOTALLY GOLD CHECKING ACCOUNT			account required.							
Please note: Totally Gold Checking requires Visa Debit Card, eStatements/ eNotices, ComputerLine® access, and direct deposit if available. By selecting Totally Gold Checking, I/we also select eStatements as my/our official			Insured Money Management Account (IMMA) — Earn higher dividends on balances over \$2,000.00. Transaction eNotices							
account statement and agree that the eStatement notification will be sent to the email address noted on page 1 of this application. I/we agree to open and read the eStatement disclosure and confirmation that will be sent to the email address above.			Certificate (circle all terms that apply) — Earn fixed dividends that are higher than traditional							
Classic Checking Account — Paper statements				savings accounts. 3 months 2 years						
☐ Money Market Checking Account —				6 months	3 years					
Earn dividends, paper statements				1 year	4 years					
☐ Debit Card — # of Visa Debit Cards				1 Year Add-On	5 years					
*FICO is a registered trademark of Fair Isaac Corporation in the United States and other countries. 3-60 months (designate term)										
SECTION D		MEMBE	RSHI	P AND ACCOUNT AGR	EEMENT					

IRS Certification: I certify under penalty of perjury that I am a U.S. person (including a U.S. resident alien), the Taxpayer Identification Number (Social Security Number) given is correct, that I have not been notified by the IRS that I under-reported or failed to report interest or that the IRS has notified me that I am no longer subject to backup withholding. Please cross out any section that does not apply.

By signing below, I/we hereby make application for membership in, and agree to abide by the bylaws and amendments of, Michigan State University Federal Credit Union, operating under the trade name Oakland University Credit Union. I/we acknowledge receiving a copy of the terms and conditions applicable to each deposit or service that I/we open concurrently with this application and agree to be bound by those terms. I/We further understand and agree that I/we shall be bound by the terms and conditions of any other account or service that I/we may later open. Any account opened in more than one name shall be a joint account with rights of survivorship. For any account on which I/we designate a beneficiary(les), the account shall be deemed in my/our name(s) as trustee. I/We hereby authorize the Credit Union to check my/our credit and employment history(ies) and to answer questions about the Credit Union's credit experience with me/us. I specifically authorize the Credit Union to access our credit reports, credit scores and other financial history and I consent to the use of such information to process this application and determine whether I/we qualify for other products and services the Credit Union may offer me/us. I hereby authorize the release, by my Credit Union records custodian, of any information pertaining to my/our past and present financial status and any action pending or taken against me/us in the past. The undersigned authorizes the receipts and exchange of credit information.

Oakland University Credit Union, OU Credit Union, is a trade name of Michigan State University Federal Credit Union (MSUFCU). MSUFCU remains the legal entity behind both brands, MSUFCU and OU Credit Union. Your legal documents and Federal Reserve transactions will be listed in your account as MSUFCU.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask you for your name, address, date of birth, and other information that will allow us to identify you. We may ask for your driver's license or other identifying documents.

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

Signature	Date
1st Joint Party Signature	Date
2nd Joint Party Signature	Date

card type you would like to apply for: We hereby apply for an OU Crec omply with the terms of the Agrecords. Please issue a separate V inswer questions about the Crec inancial history and I/we consend services the Credit Union maast and present financial status	greement and Truth-in-Len Visa card with each name pedit Union's credit experienent to the use of such informany offer to me/us. I/we her	line of credit. In the event that the ding Disclosure Statement that will rinted below. I/we hereby authori- ce with me/us. I/we specifically aut	iross Monthly Income Visa Credit Card line of credit a Il be furnished with the card. I/ ze the Credit Union to check m		•	INCOME VERIFICATION FOR APPLICANTS UNDER AGE 21 Job: \$/ month (please fill out employer information) Financial aid: \$/ month			
card type you would like to apply for: We hereby apply for an OU Crec omply with the terms of the Agrecords. Please issue a separate V inswer questions about the Crec inancial history and I/we consend services the Credit Union maast and present financial status	Platinum Plus Visa Signature® edit Union Visa Credit Card greement and Truth-in-Len Visa card with each name pedit Union's credit experien ent to the use of such inforn nay offer to me/us. I/we her	Date Employed Guine of credit. In the event that the ding Disclosure Statement that will crinted below. I/we hereby authorize with me/us. I/we specifically aut	Visa Credit Card line of credit a Il be furnished with the card. I/ ze the Credit Union to check m	Mortgage/Ren	•	☐ Job: \$/ month (please fill out employer information) ☐ Financial aid: \$/ month			
we hereby apply for an OU Crecomply with the terms of the Agrecords. Please issue a separate V inswer questions about the Creconancial history and I/we consend services the Credit Union mast and present financial status	edit Union Visa Credit Card greement and Truth-in-Len Visa card with each name pedit Union's credit experien ent to the use of such inforn nay offer to me/us. I/we her	line of credit. In the event that the ding Disclosure Statement that will rinted below. I/we hereby authori- ce with me/us. I/we specifically aut	Visa Credit Card line of credit a Il be furnished with the card. I/ ze the Credit Union to check m	applied for is issued, I/	•	☐ Financial aid: \$/ month			
omply with the terms of the Agi ecords. Please issue a separate V nswer questions about the Crec nancial history and I/we consen nd services the Credit Union ma ast and present financial status	greement and Truth-in-Len Visa card with each name pedit Union's credit experienent to the use of such informany offer to me/us. I/we her	ding Disclosure Statement that wil printed below. I/we hereby authori te with me/us. I/we specifically aut	ll be furnished with the card. I/ ze the Credit Union to check m						
igned this day oformation truly and correc	ıs and any action pending c	eby authorize the release, by my/o r taken against me/us in the past.	on for a credit card and to dete our Credit Union records custoo	tess my credit report, e ermine whether I/we dian, of any informatio	ich information for our ployment history and to credit score, and other qualify for other products on pertaining to my/our	Parent support: \$/ month If above equals zero and you are under age 21, you are required to have a parent/guardian joint party. ISSUE CARDS TO THE FOLLOWING AUTHORIZED USERS: (PRINT NAMES)			
	ay of ectly to the best of my	knowledge and for the purpo	By affixing my signaturose of obtaining credit from	re to the application the Credit Unic	on, I present this on.	1. Name			
				itials here, I agree that I a	m applying for a joint loan.	SSN			
ignature 🕨			Арр	plicant Initials		2. Name			
Joint Party Signature				nt Party Initials		SSN			
and Joint Party Signature)		2nd Joi	int Party Initials					
spersonal identification numb	ber (PIN) for cash advances	at ATMs will be issued on this acc	count.	sa eStatements	Check here to re	quest information about Debt Protection			
our credit card account. I/we un or example, if I/we have an unp	understand I/we may withon npaid credit card balance,	raw funds from the account(s) un	less I/we are in default. When use funds in my/our account(s	I/we are in default, I/	/we authorize OU Credit U	have with OU Credit Union now and in the future to secure my/nion to apply the balance in the account(s) to any amounts due. rstand any IRA, HSA, CESA, or any other account that would lose			
sy signing below, I/we are affirn	rmatively agreeing that I/v	e are aware the granting of a secu	urity interest is a condition for	r the credit card and I	I/we intend to grant a secu	rity interest in my/ our account(s).			
ignature 🕨		Joint Party Signatu	ıre 		2nd Joint Par	ty Signature 🕨			

Returned

Convenience Check

OU Credit Union Platinum Plus and Visa Signature Credit

OU Credit Union Pla	atinum Visa Credit Card Disclosure	Card Disclosure	ann i ias ana visa signatare cicare			
Interest Rates and Int	terest Charges	Interest Rates and Interest Charges				
Annual Percentage Rate (APR) for Purchases	9.9% to 17.9% based on your creditworthiness	Annual Percentage Rate (APR) for Purchases	13.9% to 17.9% based on your creditworthiness			
APRs for Balance	0% introductory APR for six (6) months	APRs for Balance Transfers	13.9% to 17.9% based on your creditworthiness 13.9% to 17.9% Platinum Plus 14.9% to 17.9% Visa Signature based on your creditworthiness			
Transfers	from date of account opening. Rate then reverts to standard rate (9.9% to 17.9%), based on your creditworthiness.	APRs for Cash Advances				
APRs for Cash Advances	9.9% to 17.9% based on your creditworthiness	Penalty APR and When It Applies	17.9%			
Penalty APR and When It Applies	17.9% The Penalty APR is applied if your account becomes delinquent 60 days.	when it Applies	The Penalty APR is applied if your account becomes delinquent 60 days. How Long Will the Penalty APR Apply? The Penalty Annual Percentage Rate will apply until you make six (6) consecutive minimum ontime payments and the line of credit is current.			
	How Long Will the Penalty APR Apply? The Penalty Annual Percentage Rate will					
	apply until you make six (6) consecutive minimum on-time payments and the line of credit is current.	How to Avoid Paying Interest on Purchases	Your due date is at least 25 days after the close of each billing cycle. We will not charge you any interest on purchases if you pay your entire			
How to Avoid Paying Interest on Purchases	Your due date is at least 25 days after the close of each billing cycle. We will not charge you any interest on purchases if you pay your entire balance by the due date each month.	For Credit Card Tips from the Consumer Financial Protection	balance by the due date each month. To learn more about factors to consider when applying for or using a credit card, visit the website of the Consumer Financial Protection Bureau at www.consumerfinance.gov/			
For Credit Card Tips from the Consumer Financial Protection To learn more about factors to consider when applying for or using a credit card, visit the website of the Consumer		Bureau	learnmore			
		Fees	\$0 Platinum Plus			
Bureau	Financial Protection Bureau at www. consumerfinance.gov/learnmore	Annual Fees	\$0 for the first year; \$99 thereafter for Visa Signature			
Fees Transaction Fees	1% for ATM transactions	Penalty Fees	\$25 if the minimum payment due is \$25 or more;			
International transaction and cash advance fees	3% for all other transactions calculated after the transaction has been converted to U.S. dollars	Late Payment	\$15 if the minimum payment due is \$25 of Hole, \$15 if the minimum payment due is \$15 to \$24.99; or \$0 if the minimum payment due is less than \$15			
Penalty Fees Late Payment	\$25 if the minimum payment due is \$25 or more;	Other Fees • Returned Convenience Check	\$25			
	\$15 if the minimum payment due is \$15 to \$24.99; or \$0 if the minimum payment due is less than \$15	How We Will Calculate Your Balance: We use a method called "average daily balance (including new transactions)." Loss of Introductory APR: We may end your introductory APR and apply the Panalty APR if your account becomes 60 days delinguent.				
Other Fees	\$25	the Penalty APR if your account becomes 60 days delinquent. Billing Rights: Information on your rights to dispute transactions and how				

Billing Rights: Information on your rights to dispute transactions and how to exercise those rights is provided in your account agreement.

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	FOR OFFICE USE ONLY	
☐ Membership approval	Date	NCUA
Date approved	Account opened by (Employee ID #)	Federally insu