

MEMBERSHIP AND ACCOUNT APPLICATION

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

A \$5.00 minimum deposit ACCOUNT # into your Spartan Saver is required to open your account. **SECTION A - APPLICANT INFORMATION** ☐ New Account ☐ Add Joint Party ☐ Add Checking Account ELIGIBILITY: You must be eligible for membership to open an account. *MSU = Michigan State University ☐ Employee of Select Employee Group ☐ Faculty, staff, or student of MSU* or Cooley Law School ■ MSU donor ☐ Immediate family member of eligible group ☐ Individual living in household of eligible group making up an economic unit ☐ Attended or graduated from MSU ☐ Individuals who live, work, worship, attend school, or have a business located within Oakland, ☐ Work on MSU campus and under control of school's governing bodies ☐ Member of Michigan United Conservation Clubs Genesee, Lapeer, Livingston, or Macomb counties Are you a permanent resident of the U.S.? ☐ Yes Middle Permanent Mailing Address– Street & Apt. ☐ Own ☐ Rent First Name Last State 7IP Mailing Address (If different than permanent) – Street & Apt. ☐ Own ☐ Rent Citv State 7IP Other Phone Mobile Phone Email Address If we have questions, what is the best way to contact you? ☐ Phone ☐ Email Date of Birth Social Security No. Mother's Maiden Name Driver's License/Passport or Other Documentation/ID State of Issue Date of Expiration **Employer** Occupation **Date Employed** Joint Party First Name Middle Last Mailing Address- Street & Apt. City State ZIP Other Phone Mobile Phone **Email Address** Date of Birth State of Issue Date of Expiration Social Security No. Mother's Maiden Name Driver's License/Passport or Other Documentation/ID **Employer** Occupation Date Employed 2nd Joint Party First Name Middle Last Mailing Address-Street & Apt. City State ZIP Mobile Phone Other Phone **Email Address** Date of Birth Social Security No. Mother's Maiden Name Driver's License/Passport or Other Documentation/ID State of Issue Date of Expiration Employer Occupation Date Employed **SECTION B DESIGNATION OF BENEFICIARY** Upon the death of the owner, or the last surviving owner if there is more than one, the funds covered by this agreement shall become the property of the beneficiary(ies) listed below who is/are are alive at that time. Each beneficiary shall have the power to withdraw his/her share of the remaining balance. No beneficiary shall have any right under any circumstances to change the terms and conditions of this agre **Full Name** Relationship Address

Phone	Date of Birth	Social Security No.	Percentage
Full Name	Relationship	Address	
Phone	Date of Birth	Social Security No.	Percentage

OPEN YOUR MSUFCU VISA CREDIT CARD

No Balance Transfer Fees

Some financial institutions charge fees of up to 8% of your balance transfer amount. MSUFCU has no balance transfer fees. Transferring your credit card balances is quick, easy, and you'll save money with MSUFCU's low interest rates.



MSUFCU Platinum Visa

Enjoy greater buying power with MSUFCU's Platinum Visa Credit Card. Rates are **as low as 8.9% APR.**¹

- Credit limit up to \$50,000
- \$0 fraud liability
- 25-day grace period on purchases
- · No application or annual fees
- Accepted everywhere you see the Visa logo



MSUFCU Platinum Plus Visa

Receive the same great features as our Platinum Visa Credit Card and earn cash back on every purchase with the MSUFCU Platinum Plus Visa Card! Rates are **as low** as 12.9% APR.¹

Earn 1% cash back on all purchases with your Platinum Plus Visa.²

SECTION C

MEMBERSHIP AND ACCOUNT AGREEMENT

certify under penalty of perjury that 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. I am a U.S. person (including a U.S. resident alien with a completed W-8BEN). Please cross out any sections that do 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. I/we acknowledge receiving a copy of the terms and conditions applicable to each deposit account 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 deposit 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(ies), 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. 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 fir this means for you: When you open an account, we will ask you for your name, address, date of birth, and other in Signature Joint Party Signature					nformation that will allow us to identify you. We may ask for your driver's license or other identifying document Date								
2nd Jo	int Paı	rty Signatur	re >					Date			_		
•		_	v, I/we agree to a EN CHECKING A reen Checking, I/we a d read the eStateme		•						e access, and direct deposi sent to the email address n	t if available. oted above.	
	☐ Classic Checking Account ☐ Money Market Checking Account ☐ Visa eStatements				✓ Visa Debit Card - # of Visa Debit Cards ☐ Payment eNotices ☐ Trans				ection eNotices				
SEC	TI	ON D					VISA APP	LICATION					
			n MSUFCU Visa Credit (INCOME	VERIFICAT							
of credit. In the event that the Visa Credit Card line-of- credit loan applied for is issued, I/we agree to read and comply with the terms of the Agreement and Truth-in- Lending Disclosure Statement that will be furnished with the card. I/We agree to retain such information for our records. Please issue a separate Visa Credit Card produced with each name printed. I/We hereby give authorization to my/our employer(s) to release any			Employer		Occupation	Occupation		INCOME VERIFICATION FOR APPLICANTS UNDER AGE 21 Job: \$/ month (please fill out employer information)					
			Date Emplo	Date Employed Monthly Gross Pay Mortgage/Rent Payment		☐ Financial aid: \$/ month (scholarships, loans, grants, etc.)							
emplo	ymen	t verification authorize	n to the Credit Union. the Credit Union to c	heck	By affixing r	Signed this day of, By affixing my signature to the application, I present this information truly and correctly to					If above equals zero	☐ Parent support: \$/ month If above equals zero and you are under age 21, you are	
answe	er any expe	questions a	oloyment history and about the Credit Unio me/us. I/We hereby o urity interest in the C	on's grant	Signature	the best of my knowledge and for the purpose of obtaining credit from the Credit Union. Signature			required to have a parent/guardian joint party. ISSUE CARDS TO THE FOLLOWING				
Union account listed above, and in any other accounts at the Credit Union which I/we own, except for Individual Retirement Accounts. I/We						Joint Party Signature 2nd Joint Party Signature			AUTHORIZED US		NT NAMES)		
acknowledge that granting this security interest is a condition for the credit card account.					Joint Party	Joint Party Initials 2nd Joint Party Initials 2.							
								obtain information a		ıt	3		
SF	СТІ	ON E						E USE ONLY	••				
			nnroval										State amount of the inventor of the order of the state of
☐ Membership approval						Acc	ount opened by (Er	mpl	loyee ID #)			Federally insured by NCUA	
MSUFCU Visa Credit Card Disclosure	Interest Rates and Interest Charges Annual Percentage Rate 8.9% to 17.9% (APR) for Purchases	based on your creditworthiness 0% introductory APR for six (6) months from date of account opening. Rate then reverts to standard rate (8.9% to 17.9%), based on your creditworthiness. 8.9% to 17.9% based on your creditworthiness	17.9% The Penalty APR is applied if your account becomes delinquent 60 days.	Long Will the Penalty APR y? enalty Annual Percentage Rate pply indefinitely.	st 25 days billing cycle. I any interest y your entire te 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 http://www.consumerfinance.gov/learnmore		1% for ATM transactions 3% for all other transactions calculated after the transaction has been converted to U.S. dollars	\$25 or more; \$15 or more; \$15 if the minimum payment due is \$15 to \$24.99; or \$0 if the minimum payment due is less than \$15	\$25	How We Will Calculate Your Balance: We use a method called "average daily balance (including new purchases)." Loss of Introductory APR: We may end your introductory APR and apply the Penalty APR if your account becomes 60 days delinquent.		
	Interest Rates and Interest Charges	Annual Percentage Rate (APR) for Purchases	APRs for Balance Transfers	APRs for Cash Advances	Penalty APR and When It Applies		How to Avoid Paying Interest on Purchases	For Credit Card Tips from the Consumer Financial Protection Bureau	Fees	Transaction Fees International transaction and cash advance fees	Penalty Fees • Late Payment	Other Fees • Returned Convenience Check	How We Will Calculate Your Balance: We use a raverage daily balance (including new purchases) Loss of Introductory APR: We may end your intrand apply the Penalty APR if your account becomdelinquent.