



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

- New Account
- Name Change
- Trustee Change

Account Number

## Trust Account Application

### SECTION A

### ELIGIBILITY

All owners of the trust must either be 1) a current MSUFCU member, or 2) be eligible for membership to open a Trust Account. Any and all personal accounts must be in good standing.

ELIGIBILITY: Please select one.

- |  |  |
|--|--|
| <input type="checkbox"/> Faculty, Staff, or Student of MSU, OU, or CL*<br><input type="checkbox"/> MSU or OU Alumni Association member<br><input type="checkbox"/> Member of Michigan United Conservation Clubs<br><input type="checkbox"/> MSU Alumni Assn. Legacy Program member | <input type="checkbox"/> Work on MSU or OU campus and under control of school's governing bodies<br><input type="checkbox"/> Employee of Select Employee Group<br><input type="checkbox"/> Immediate family member of above eligible group<br><input type="checkbox"/> Individual living in household of above eligible group making up an economic unit |
|--|--|

\* Eligible Schools - MSU: Michigan State University / OU = Oakland University / CL = Cooley Law School

Required Documentation:

- Certificate of Trust** (Duplicate or original accepted; may use MSUFCU's form or existing Certificate of Trust.)

### SECTION B

### APPLICATION INFORMATION — PLEASE PRINT

Name of Trust			Date of Trust	Tax Identification #	
Mailing Address—Street & Apt. #		City	State	Zip	
Trustee #1 - First Name	Middle	Last	Mailing Address (if different from trust address above)		
Email	Date of Birth	Cell Phone	Social Security #	Driver's License #	
		Home Phone			
Trustee #2 - First Name	Middle	Last	Mailing Address (if different from trust address above)		
Email	Date of Birth	Cell Phone	Social Security #	Driver's License #	
		Home Phone			
Trustee #3 - First Name	Middle	Last	Mailing Address (if different from trust address above)		
Email	Date of Birth	Cell Phone	Social Security #	Driver's License #	
		Home Phone			

### SECTION C

### TAXPAYER IDENTIFICATION NUMBER IRS CERTIFICATION

Under penalties of perjury, I certify, as Settlor-Trustee: (1) that the number shown on this form is my correct Social Security Number, and (2) that I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding.\*

I am a U.S. person (including a U.S. resident alien).

Signature of Trustee (1) \_\_\_\_\_ Date \_\_\_\_\_

\* Strike out the language in (2) above if the IRS has notified you that you are not subject to backup withholding and has not terminated that notification.

**SECTION D**

**MEMBERSHIP AND ACCOUNT AGREEMENT**

By signing below I hereby make application for membership in, and agree to abide by the bylaws and amendments of, Michigan State University Federal Credit Union. I acknowledge receiving a copy of the terms and conditions applicable to each deposit account or service that I open concurrently with this application and agree to be bound by those terms. I further understand and agree that I shall be bound by the terms and conditions of any other deposit account or service that I may later open. I/We hereby authorize MSUFCU to check my/our credit and employment history(ies) and to answer questions about MSUFCU'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 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.

Trustee #1 Signature \_\_\_\_\_

Trustee #2 Signature \_\_\_\_\_

Trustee #3 Signature \_\_\_\_\_

**ACCOUNT SERVICES SELECTION**

By checking below, I/we agree to apply for/request the selected service(s):

- TOTALLY GREEN CHECKING ACCOUNT**  
Please note: Totally Green Checking requires Visa Debit Card, eStatements/eNotices, ComputerLine Access, and Direct Deposit, if available.  
 By selecting Totally Green Checking, I/we also select eStatements as my/our official account statement and agree that the eStatement notification will be sent to the email address noted above. I/we agree to open and read the eStatement disclosure and confirmation that will be sent to the email address above.
- Classic Checking Account**
- Money Market Checking Account**
- Transaction eNotices**  
(NSF, COURTESY PAY, OVERDRAFT)
- Visa Debit Card - # of Visa Debit Cards \_\_\_\_\_**
- eStatements**
- Payment eNotices**
- Visa eStatements**

**SECTION E**

**TERMS AND CONDITIONS OF ACCOUNT**

The following terms and conditions apply to this account:

- (a) All sums paid to MSUFCU on shares/deposits (less setoffs allowed by law and/or provided by contract) shall be paid on proper withdrawal demand. Such demand must be made by the Settlor-Trustee as indicated below. MSUFCU has no responsibility to follow the application of the funds withdrawn from this account.
- (b) Only methods approved by MSUFCU may be used to make withdrawals from this account.
- (c) All non-cash payments received in this account will be credited subject to final payment.
- (d) Any objection to an item shown on a periodic statement of this account must be made in writing to MSUFCU within 60 days after the statement is mailed. If the objection is not made in writing within 60 days, it is waived.
- (e) This account is subject to MSUFCU's right to require advance notice of withdrawal, as provided in MSUFCU's bylaws.
- (f) This account is also subject to other such terms and conditions as MSUFCU may establish from time to time. MSUFCU may change the terms and conditions of this account upon giving 15-days advance written notice. Notice may be given by U.S. Mail, first class, postage prepaid, to the last known address of the Settlor-Trustee(s) as reflected in MSUFCU's records.
- (g) MSUFCU will act in accordance with the terms and conditions of the most recent information provided to MSUFCU regarding the provisions of the trust document. Furthermore, MSUFCU is not bound by any changes to the trust document of which it has not received written notice.

By signing below, I/we agree that all Trustees may act independently on any assets held in the trust account held at MSUFCU.

\_\_\_\_\_  
Signature of Trustee (1) Date

\_\_\_\_\_  
Signature of Trustee (2) Date

\_\_\_\_\_  
Signature of Trustee (3) Date

**For Office Use Only**

Account opened by (Emp ID#) \_\_\_\_\_ Membership Approval by (Emp ID#) \_\_\_\_\_ Date \_\_\_\_\_

