

# YOUTH ACCOUNT APPLICATION

#### **REQUIREMENTS TO OPEN A YOUTH ACCOUNT**

For any account established by or for a minor, the minor account owner must have a joint account owner who is a parent or legal guardian of the minor. The minor's Taxpayer Identification Number (TIN) must be provided on the application, and MSUFCU may require further identification documentation for the minor. MSUFCU reserves the right to limit the accounts and services that are available to minors.

ACCOUNT #	A \$5.00 minimum deposit into your Spartan 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.<sup>1</sup>

□ Faculty, employee, or student of MSU<sup>2</sup> or OU<sup>3</sup>

□ Employee or student of Cooley Law School<sup>4</sup>

□ MSUFCU Desk Drawer Foundation donor<sup>5</sup>

Attended or graduated from MSU or OU

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

□ Individuals who live, work, worship, or attend school in the state of Michigan

- $\hfill\square$  Immediate family member of eligible group
- Individual living in household of eligible group making up an economic unit
- Employee of Select Employee Group

<sup>1</sup>For a complete list of membership eligibility options, please call MSUFCU or visit msufcu.org/whocanjoin. <sup>2</sup>MSU = Michigan State University <sup>3</sup>OU = Oakland University <sup>4</sup>Cooley Law School = Thomas M. Cooley Law School located in Lansing, Michigan <sup>5</sup>\$10 minimum donation

SECTION B			APPLICANT INFORMATIO	N				
Citizenship Status 🛛 U.S. Citize	n 🗆 Resident A	lien (permanent	resident) 🛛 Nonresident Alien (temp	orary reside	nt)			
Minor Name First	Middle I	.ast	Physical Address – Street/Apt. 🛛 Own	🗆 Rent	City		State	ZIP Code
Mailing Address (If different than p	hysical address) – S	Street/Apt. or PO E	Зох	City			State	ZIP Code
Mobile Phone*	Other Phone*		Email Address*			Mother's Maide	n Name	1
Date of Birth	Social Security No	./TIN	Driver's License/Passport or Other Docu	imentation/ID		State of Issue	Date of Expir	ation
1st Joint Party Information Ci	tizenship Status	🗆 U.S. Citizen	Resident Alien (permanent resident)	□ Nonres	ident Ali	en (temporary r	resident)	
Name First	Middle	_ast	Physical Address – Street/Apt. 🛛 Own	🗆 Rent	City		State	ZIP Code
Mailing Address (If different than p	hysical address) – S	Street/Apt. or PO I	Зох	City			State	ZIP Code
Mobile Phone*		Other Phone*				Mother's Maider	n Name	
Date of Birth	Social Security No	)/TIN	Driver's License/Passport or Other Docu	umentation/ID		State of Issue	Date of Expira	ation
Email Address*			Employer/Previous Employer			Date Employed		
Occupation			Employment Status		Monthly	Gross Income		
2nd Joint Party Information Ci	tizenship Status	🗆 U.S. Citizen	Resident Alien (permanent resident)	□ Nonres	ident Ali	en (temporary r	resident)	
Name First	Middle	Last	Physical Address – Street/Apt. 🛛 Own	🗅 Rent	City		State	ZIP Code
Mailing Address (If different than p	hysical address) –	Street/Apt. or PO	Box	City			State	ZIP Code
Mobile Phone*		Other Phone*		I		Mother's Maide	n Name	
Date of Birth	Social Security No	D./TIN	Driver's License/Passport or Other Doct	umentation/ID		State of Issue	Date of Expira	ation
Email Address*	1		Employer/Previous Employer			Date Employed		
Occupation			Employment Status		Monthly	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**

# ACCOUNT SERVICE SELECTION

By checking below, I/we agree to apply for/request the selected services:

# **Checking Options**

 $24/7\ \text{access},$  free ATM access, free bill payment, direct deposit, and eStatements

# TOTALLY GREEN CHECKING ACCOUNT Please note: Totally Green Checking requires a Visa Debit Card, eStatements/eNotices, ComputerLine® access, and direct deposit if available. To consent to receiving eStatements, eNotices, and other electronic correspondence, you will need to log in to your account via ComputerLine or the mobile app and follow the prompts. If you do not complete your consent within 45 days, or if you decline eStatements or eNotices, your Totally Green Checking will be converted to a Classic Checking.

Classic Checking Account — Paper statements

Money Market Checking Account — Earn dividends, paper statements

Debit Card — # of Visa Debit Cards \_\_\_\_\_

# **Savings Options**

Insured Money Management Account (IMMA) — Earn higher dividends on balances over \$2,000.

▲ Certificate (check all terms that apply) — Earn fixed dividends that are higher than traditional savings accounts.

**1** Year Add-On

3 Months	
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4 Years

**5** Years

9 Months

6 Months

3 Years

2 Years

a Debit Cards	

**SECTION D** 

#### **MEMBERSHIP AND ACCOUNT AGREEMENT**

**IRS Certification:** I certify under penalty of perjury that: (1) The Taxpayer Identification Number (e.g., Social Security number, individual taxpayer identification number, or adoption taxpayer identification number) in Section B of this document is correct; (2) I am a U.S. citizen or U.S. person (including a U.S. resident alien); (3) I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of failure to report all interest or dividends, or (c) 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 ("Credit Union"). By signing this document, I/We further acknowledge that I/we will be provided a copy of the Account Agreements and Disclosures (which consist of the Membership and Account Agreement, the Electronic Funds Transfer and Payment Services Agreement and Disclosure, the Electronic Correspondence Disclosure and Agreement, the Truth in Savings and Funds Availability Disclosure, the Certificate Disclosure, the Schedule of Service Charges, and the Policy Notice) and all other disclosed terms and conditions applicable to each account or service that I/we open concurrently with this application, and I/we agree to be bound by those terms, as amended. 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. If I/we are provided a debit card(s), I/we acknowledge that I/we will read and maintain for my/our records the Visa Debit Card Agreement that will be provided to me/ us and I/we will evidence my/our agreement to the conditions contained therein by my/our use of any card. 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/We specifically authorize the Credit Union to access my/our credit greent, credit sores, and other financial history and I/we 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/We hereby authorize the release, by my/our Credit Union records custodian(s), of any information pertaining to my/our past and present financial status and any action pending or taken against me/us in the past. I/We authorize the r

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.

routh signature of	
Legal Parent/Guardian Signing on Behalf of Minor 🕨	Date
Parent/Legal Guardian Signature	Date
2nd Joint Party Signature	Date

## **VISA APPLICATION FOR YOUTH AGE 14 AND OLDER**

#### Youth members ages 14 and older may apply for a Platinum Visa Credit Card.

I/We hereby apply for an MSUFCU Visa Credit Card line of credit. In the event	PARENTAL INCOME VERIFICATION				
that the Visa Credit Card line of credit 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 card with each name	Employer		Occupation		
printed below. I/we hereby authorize the Credit Union to check my/our credit and employment history and to answer questions about the Credit Union's credit experience with me/us. I/we specifically authorize the Credit Union to access my	Date Employed	Gross Monthly Income	e	Mortgage/Rent Payment	
credit report, credit score, and other financial history and I/we consent to the use of such information to process my/our application for a credit card and to determine whether I/we qualify for other products and services the Credit Union may offer to me/us. I/we hereby authorize the release, by my/our Credit Union	ISSUE CARDS TO THE FOLLOWING AUTHORIZED USERS: (PRINT NAMES)				
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 receipt and exchange of credit information.	1. Name 2. Name				
Signed this day of,, knowledge and for the purpose of obtaining credit from the Credit Unio				nd correctly to the best of my	
Youth Signature or Legal Parent/Guardian Signing on behalf of Minor			By placing my initials he joint loan. Applicant Initial	ere, I agree that I am applying for a	
1st Joint Party Signature     2nd Joint Party Signature			1st Joint Party	Initials	
			2nd Joint Party	/ Initials	
A personal identification number (PIN) for cash advances at ATMs will be issued on	this account. 🔲 Visa eStatements	S 🖵 Check here to re	quest information abo	out MSUFCU Debt Protection <sup>ss</sup>	

Consensual Security Interest: I/we grant and consent to a security interest in the shares and dividends in any individual or joint account(s) at MSUFCU that I/we have with MSUFCU now and in the future to secure my/our credit card account. I/we understand I/we may withdraw funds from the account(s) unless I/we are in default. When I/we are in default. I/we authorize MSUFCU to apply the balance in the account(s) to any amounts due. For example, if I/we have an unpaid credit card balance, I/we agree MSUFCU may use funds in my/our account(s) to pay any or all of the unpaid balance. I/We understand any IRA, HSA, CESA, or any other account that would lose special tax treatment under state or federal law if given as security are not subject to this security interest.

By signing below, I/we are affirmatively agreeing that I/we are aware the granting of a security interest is a condition for the credit card and I/we intend to grant a security interest in my/our account(s).

Signature 🖢 \_\_\_\_\_ 2nd Joint Party Signature 🖢 \_\_\_\_\_ 2nd Joint Party Signature 🌢 \_\_\_\_\_

## **MSUFCU Platinum Visa Credit Card Disclosure**

	a Credit Card Disclosure
Interest Rates and Intere	est Charges
Annual Percentage Rate (APR) for Purchases	<b>9.9% to 17.9%</b> based on your creditworthiness
APRs for Balance Transfers	<b>0%</b> introductory APR for six (6) months from date of account opening. Rate then reverts to standard rate ( <b>9.9% to 17.9%</b> ), based on your creditworthiness.
APRs for Cash Advances	9.9% to 17.9% based on your creditworthiness
Penalty APR and When It Applies	<b>17.9%</b> The Penalty APR is applied if your account becomes delinquent 60 days.
	<b>How Long Will the Penalty APR Apply?</b> 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 balance by the due date each month.
For Credit Card Tips from the Consumer Financial Protection Bureau	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/learnmore
Fees	
<ul> <li>Transaction Fees</li> <li>International transaction and cash advance fees</li> </ul>	<ul> <li>1% for ATM transactions</li> <li>3% for all other transactions calculated after the transaction has been converted to U.S. dollars</li> </ul>
<ul><li>Penalty Fees</li><li>Late Payment</li></ul>	<ul> <li>\$25 if the minimum payment due is \$25 or more;</li> <li>\$15 if the minimum payment due is \$15 to \$24.99; or</li> <li>\$0 if the minimum payment due is less than \$15</li> </ul>
Other Fees • Returned Convenience Check	\$25

**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 Penalty APR if your account becomes 60 days delinquent.

**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

Date

Account opened by (Employee ID #)