



# Club And Secondary Share Account Application And Agreement

MEFCU Membership is required to establish a Club or Secondary Share account. If you are not already a member, please submit a completed membership application. Visit [www.mefcudirect.com](http://www.mefcudirect.com) for an application.

MEFCU Membership Account # \_\_\_\_\_

Please select the account type you are opening (Please use a separate application for each account):

\_\_\_\_\_ Holiday Club      \_\_\_\_\_ Vacation Club      \_\_\_\_\_ College Club

\_\_\_\_\_ Winter Club      \_\_\_\_\_ Secondary Share Account

Please mail your completed application to:  
 PO Box 6006  
 Bethesda, MD 20827-6006  
 (800) 821-7280  
 or fax the application to: (301) 634-5103

**All account owners must fill out this section. Please print clearly.**

**Primary Owner Information**

**Joint Owner Information (If Applicable)**

*A copy of valid government-issued photo identification is required if you are not already joint on the primary membership account.*

\_\_\_\_\_  
 Name (First, Middle, Last)

\_\_\_\_\_  
 Home address                                          Apt#

\_\_\_\_\_  
 City, State, Zip                                      Date of Birth (MM/DD/YYYY)

\_\_\_\_\_  
 Home Phone                  Work Phone                  E-mail Address

\_\_\_\_\_  
 Social Security Number                          Drivers License Number

\_\_\_\_\_  
 Name (First, Middle, Last)

\_\_\_\_\_  
 Home address                                          Apt#

\_\_\_\_\_  
 City, State, Zip                                      Date of Birth (MM/DD/YYYY)

\_\_\_\_\_  
 Home Phone                  Work Phone                  E-mail Address

\_\_\_\_\_  
 Social Security Number                          Drivers License Number

**INITIAL DEPOSIT TO OPEN YOUR ACCOUNT:**

If you are making an initial deposit into your account, please check one or more of the boxes below.

I have enclosed \$\_\_\_\_\_ to open my account. OR I authorize MEFCU to transfer \$\_\_\_\_\_ from my MEFCU \_\_\_\_\_ Account.

Please see your Human Resources Department for a direct deposit authorization form to set up regular deposits to your account(s). If you need assistance obtaining or completing a direct deposit form, please contact us. MEFCU's routing and transit number is 255083597.

**ACCOUNT AGREEMENT:** *(A signature is required from all applicants)*

I/We agree that this account will be subject to the terms of the Truth in Savings Disclosure, Schedule of Account Fees, and Funds Availability Disclosure. I/We acknowledge receipt of these disclosures and agree to their terms and conditions. Nothing in this Agreement shall be deemed to annul, limit or in any way modify any other obligation or relationship I may have with the Credit Union now or hereafter.

\_\_\_\_\_  
**Signature of Primary Owner**                                          **Date**                                          \_\_\_\_\_  
**Signature of Joint Owner** (if applicable)                                          **Date**

**For Credit Union Use Only**

Opened By: \_\_\_\_\_ Operator Number \_\_\_\_\_ Date: \_\_\_\_\_