

Account Number _____ <i>Credit Union use only</i>
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PRIMARY OWNER INFORMATION

Last Name		First Name & Middle Initial		Social Security Number	
Date of Birth		Driver's License Number/State/Exp Date			US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address (No PO Boxes)			City/State/Zip		
Mailing Address			City/State/Zip		
Home Phone	Work Phone	Mobile Phone		Email Address	
Mother's Maiden Name			Optional Security Password <i>(requested for phone inquiries)</i>		

MEMBERSHIP ELIGIBILITY *I am eligible to join NASA Federal Credit Union (NASA FCU) in one of the following ways:*

- ☐ I am a current member, employee, or retired employee of a qualified organization: _____
- ☐ I am related to/currently live with a NASA FCU member. Their account number is: _____. Their relationship to me is: _____.
- ☐ I am requesting affiliation with NSS. By signing this Application, I understand that NSS membership is complimentary for one year and entitles me to join NASA FCU.

JOINT OWNER INFORMATION
Joint account with survivorship will apply except for Virginia residents who may choose:

- ☐ Joint With Survivorship ☐ Joint With No Survivorship

Last Name		First Name & Middle Initial		Social Security Number	
Date of Birth		Driver's License Number/State/Exp Date			US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address (No PO Boxes)			City/State/Zip		
Home Phone	Work Phone	Mobile Phone		Email Address	

Last Name		First Name & Middle Initial		Social Security Number	
Date of Birth		Driver's License Number/State/Exp Date			US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address (No PO Boxes)			City/State/Zip		
Home Phone	Work Phone	Mobile Phone		Email Address	

PAYABLE UPON DEATH PAYEES

Name	Date of Birth	Social Security Number	Relationship
Name	Date of Birth	Social Security Number	Relationship
Name	Date of Birth	Social Security Number	Relationship
Name	Date of Birth	Social Security Number	Relationship

CERTIFICATION FOR TAXPAYER IDENTIFICATION NUMBER & MEMBERSHIP ACCOUNT AGREEMENT
Under penalty of perjury, I/we certify that:

A. Membership/Account Agreement: I/we make application for membership in the NASA Federal Credit Union (NASA FCU) and certify that all information provided is true and correct. I/we provide written authorization to NASA FCU under the Fair Credit Reporting Act to obtain information from my/our personal credit profiles or other resources to verify my/our identity(ies) and/or creditworthiness. I/we agree to be bound by the most current Member Services Agreement and all other disclosures and agreements entered into which may change from time to time.

B. Certification of Taxpayer Identification Number. 1. The number shown on this form is my correct taxpayer identification number, and 2. I am not subject to backup withholding because: (a) I am exempt for backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of failure to report interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and 3. I am a U.S. Citizen or U.S. Resident Alien. 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. **Certification Instructions:** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. By crossing out item 2, I/we certify that the language related to underreporting does not apply. If you are not a U.S. Citizen or Resident Alien, complete a W-8 BEN to certify foreign status.

Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____

THE INTERNAL REVENUE SERVICE DOES NOT REQUIRE CONSENT TO ANY PROVISIONS OF THIS DOCUMENT OTHER THAN THE CERTIFICATION REQUIRED TO AVOID BACKUP WITHHOLDING.

Primary Owner Signature _____ Date _____

Joint Owner Signature _____ Date _____

Joint Owner Signature _____ Date _____

Instructions to Return Your Completed Application

1. Identification* (ID): Please include a notarized copy of government-issued identification for each owner. Copies must be notarized and include clear picture AND information. Ex. State Issued Driver's license/ID card, Passport or Military Identification.

2. Mail Application: NASA Federal Credit Union, P.O. Box 1588, Bowie, MD 20717-1588. Or, NASA Federal Credit Union, 500 Prince Georges Blvd, Upper Marlboro, MD 20774.

**For Applicants under 18 (and without state/govt issued ID), please provide copies of birth certificate and social security card. When legal name is not reflected on ID, supporting documentation is needed: Marriage License or Court Document reflecting name change. If current address is not reflected on ID, supporting documentation is needed: utility bill, lease agreement, or motor vehicle address change document.*

For Special Accounts such as Trusts, Estates or Custodial Accounts, please call us at 1-888-627-2328.



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