



CORNING CREDIT UNION MEMBERSHIP APPLICATION

Account Number _____ (CU Use Only)

PRIME MEMBER

Name _____ SSN _____ - _____ - _____ Birth Date ____/____/____

Drivers Lic /Student ID # _____ State/Type _____ Issue Date _____ Exp Date _____

Mailing Address _____ City _____ State _____ Zip _____

Residence Address _____ City _____ State _____ Zip _____

Phone Number _____ Home Cell Email Address _____

Mother's Maiden Name or Password _____ Field of Membership: Chemung County

I already have an account at _____

JOINT MEMBER - Optional at Student Branch Only

Name _____ SSN _____ - _____ - _____ Birth Date ____/____/____

Drivers Lic /Student ID # _____ State/Type _____ Issue Date _____ Exp Date _____

Mailing Address _____ City _____ State _____ Zip _____

Residence Address _____ City: _____ State _____ Zip _____

Phone Number _____ Home Cell Email Address _____

Field of Membership _____

In addition to a Prime SHARE SAVINGS ACCOUNT, I (we) request to add the following accounts/services. I (we) may add additional services in the future in accordance with the Credit Union's policies and procedures, which may or may not require an additional signature. Additional services will be subject to the terms of this application, Member Services Guide, as well as other documents pertaining to the specific service.

Dial Accounts Direct® (Four-digit number for accessing info via phone) _____

Checking Accounts (18+ Prime or Joint)

- Value Checking®
- X-treme Checking®
- All Access Checking®
- Windfall Checking®

Additional Savings Accounts

- Holiday Club Account
- All Purpose Account

Cards (Choose one)

- ATM
- X-treme® Debit (Requires Checking)
- CU-Extra® Debit (Requires Checking)

Each person signing applies for membership in Corning Federal Credit Union. The accounts, I (we) open at, and the services I (we) receive from the Credit Union will be governed by the provisions of this application, the Member Services Guide and the Credit Union Bylaws, as amended from time to time. I (we) agree to the terms and conditions as stated in those documents.

If more than one person signs below, each person signing below understands that each account will be governed by the "Joint Account Ownership" section of the Member Services Guide. All subaccounts of our joint share account must be joint. We will own the share account and all subaccounts as "joint tenants with right of survivorship" regardless of whose funds are deposited in the account and regardless of who deposits the funds in the account. Any person on the account acting alone can open a joint subaccount and request Credit Union services in the names of all owners of the joint account. Any one of us acting alone shall have the right to draw on the accounts, without limit, and may pledge all or part of the share in our joint share accounts and subaccounts as collateral security for a loan or loans from the Credit Union. In case of death of either or any of us, the survivor or survivors shall be the sole owner or owners of the entire account subject to any applicable legal claims on the decedent's share of the funds. The Credit Union may and shall send all notices and account statements only to the Prime Member's address. If these are joint accounts/services with a minor, I (we) adult joint member(s) understand that the accounts/services are governed by the "Accounts Owned Jointly by Adults and Minors" section of the Member Services Guide and I (we) agree to the terms and conditions stated. If we determine that you have supplied false or misleading information on this application, this application will be deemed void.

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, the Credit Union will ask for your name, address, date of birth and other information that will allow us to identify you. The Credit Union may also ask you to provide your driver's license or other identifying documents.

All Accounts are variable rate Accounts. As such, the Credit Union reserves the right to change the rates at any time and at its sole discretion.

Consent to Contact You At Any Telephone Number You Provide

By providing your phone number to Corning Credit Union, you consent to being contacted at that number about all your Corning Credit Union Accounts and/or loans. You agree that Corning Credit Union (or its agents and contractors) may use live voice, text messaging, artificial or prerecorded voice messages, automatic dialing systems or technology and/or an "autodialer" (as defined by the Federal Communications Commission) in connection with calls or texts made to any telephone number you provide to Corning Credit Union, even if the telephone number is a cellular/mobile telephone number for which the called party is charged. You may contact us any time to withdraw your consent.

Certification as to Taxpayer Identification Number and Backup Withholding Instruction to Prime Member:
If you have been notified by the Internal Revenue Service (IRS) that you are subject to backup withholding due to payee underreporting and you have not received a notice from the IRS that the backup withholding has been terminated, you must strike out the language in clause 2 below.

Certification as to Taxpayer Identification Number and Backup Withholding:
Under penalties of perjury, I certify that (1) the number shown on this form is my correct taxpayer identification number; and (2) I am not subject to backup withholding either 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; and (3) I am a U.S. person (including U.S. alien); and (4) the FATCA Exemption code is not applicable as this account will be held and maintained within the U.S.

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

SIGNATURES NEEDED BELOW

Each person signing below authorizes any and all credit reporting agencies to provide a copy of his or her credit report to the Credit Union at any time the Credit Union requests such a report. Signatures must be witnessed by a CCU Employee or notarized.

Prime Member _____	Date _____
Signature Witnessed By _____	Date _____
Joint Member _____	Date _____
Signature Witnessed By _____	Date _____

For Internal Use Only

Discrepancy Documentation, for Patriot Act Purposes.
State any discrepancy in the identity information provided above discovered through the identity verification process and the resolution of the discrepancy:

Comments: _____

Application Taken By _____	Date _____	Approved By _____	Date _____
Account Opened By _____	Date _____		