



Checking/Savings Account Application

General Information

Will there be a co-applicant on this application? Yes No

I am interested in:

Checking Account

Type of Checking Account: _____

Initial Deposit Amount: \$ _____

Source of Deposit:

Transfer from a current account at Brewer FCU. Account Number: _____

I will transfer funds from another institution.

I will mail a check/money order.

Other: _____

Savings Account

Type of Savings Account: _____

Initial Deposit Amount: \$ _____

Source of Deposit:

Transfer from a current account at Brewer FCU. Account Number: _____

I will transfer funds from another institution.

I will mail a check/money order.

Other: _____

Other Account

Type of Other Account: _____

Initial Deposit Amount: \$ _____

Source of Deposit:

Transfer from a current account at Brewer FCU. Account Number: _____

I will transfer funds from another institution.

I will mail a check/money order.

Other: _____

I am also interested in:

ATM Card ATM and Debit Card Credit Card Direct Deposit Other: _____

Primary Application Information

Member Number: _____

Last Name: _____ First Name: _____ Middle Name: _____

Social Security Number (TIN): _____ Date of Birth: _____

Home Phone: _____ Work Phone: _____ Other: _____

Email Address: _____

Drivers License # _____ Drivers License State: _____

Current Address

Home Address: _____

City _____ State _____ Zip _____

Present Employer

Name: _____ Phone Number: _____

Co-Applicant Information

Member Number: _____

Last Name: _____ First Name: _____ Middle Name: _____

Social Security Number (TIN): _____ Date of Birth: _____

Home Phone: _____ Work Phone: _____ Other: _____

Email Address: _____

Drivers License # _____ Drivers License State: _____

Current Address

Home Address: _____

City _____ State _____ Zip _____

Present Employer

Name: _____ Phone Number: _____

Additional Information

How would you prefer to be contacted?

- Home Phone
- Work Phone
- Other Phone
- Email Address
- Other: _____

Special Instructions or comments:

Signatures

Primary Signature: _____ Date _____

Joint Owner Signature: _____ Date _____