

New Membership Application

Date: _____

To help us determine basic membership qualifications, please provide the following information. A savings account with a minimum \$25 balance is required to become a member with HCU. A credit report will be obtained.

How did you hear about us? _____

I'm interested in:

- | | | | | |
|---------------------------------------|---|--|---|---|
| Services -
Check all that
apply | <input type="checkbox"/> Checking | <input type="checkbox"/> HCU VISA Debit Card | <input type="checkbox"/> Overdraft Protection | <input type="checkbox"/> Starter Checks |
| | <input type="checkbox"/> HCU Online Banking | <input type="checkbox"/> HCU Telephone Banking | <input type="checkbox"/> eStatements/eAlerts | <input type="checkbox"/> Mobile Banking |
| | <input type="checkbox"/> Money Market/Inv. Shares | <input type="checkbox"/> Certificates | <input type="checkbox"/> IRA | <input type="checkbox"/> HSA |
| | <input type="checkbox"/> Trust Account | | | |

Applicant

Name (first-middle-last)	
Present Address, City, State, Zip	Years at this Address
Social Security Number	Mothers Maiden Name
Birth Date (mm/dd/yyyy)	Home Phone
Employer and Occupation	
Drivers License: State	Drivers License: Number
Drivers License: Issue Date	Drivers License: Expiration Date
Work Phone	Mobile Phone
Email Address	
Are you a U.S. Citizen or permanent resident alien? Yes or No (circle one)	
Have you ever filed for bankruptcy or had a debt adjustment plan confirmed under Chapter 13? Yes or No (circle one)	

Co-Applicant or **Authorized Signer** or **P.O.A.**

Name (first-middle-last)	
Present Address, City, State, Zip	Years at this Address
Social Security Number	Mothers Maiden Name
Birth Date (mm/dd/yyyy)	Home Phone
Employer and Occupation	
Drivers License: State	Drivers License: Number
Drivers License: Issue Date	Drivers License: Expiration Date
Work Phone	Mobile Phone
Email Address	
Are you a U.S. Citizen or permanent resident alien? Yes or No (circle one)	
Have you ever filed for bankruptcy or had a debt adjustment plan confirmed under Chapter 13? Yes or No (circle one)	

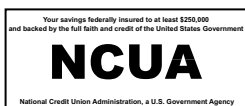
Overdraft Protection Only	Own or Rent (circle one)	Time on job
	Gross Mo. Income	Hours worked per week

Overdraft Protection Only	Own or Rent (circle one)	Time on job
	Gross Mo. Income	Hours worked per week

I authorize Heartland Credit Union to obtain credit reports in connection with this application. I promise that everything I have stated in this application is correct to the best of my knowledge.

X _____
Applicant

X _____
Co-Applicant / Authorized Signer / Power of Attorney



Credit Union use: ODP Line of Credit \$ _____ Share Transfer Acct. _____ - _____ Courtsey Pay \$ _____ -For Debit Card Trans. _____ Opt out of information sharing with HCU affiliates _____
