Application Agreement Membership & Savings Account

Authorization & Backup Withholding Information & Certification Under penalties of perjury, I certify that:

- 1. The number shown on this form is my current taxpayer identification number (SS#).
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interests 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 a U.S. resident alien).

Certification Instructions: Cross out item 2b 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. Cross out item 3 and complete a W-8 BEN if you are not a U.S. person. By signing below, you authorize WCTFCU to obtain a copy of your credit report. You also agree to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Rate & Fee Schedule, Funds Availability Policy Disclosure, and to any Amendments the WCTFCU makes. You will receive a copy of the Agreement and Disclosures applicable to the accounts and services requested and provided, you agree to the terms of the Electronic Funds Transfer Agreement and Disclosures, which you will receive by return mail. The IRS does not require your consent to any provision of this document other than the TIN certifications and backup withholding information.

X Member Signature

Electronic Disclosures Consent Signee (Member) consents and agrees that Waterbury CT Teachers Federal Credit Union (WCTFCU) may provide certain generic, standardized, non-account-specific disclosures and notices, in electronic form (via email or other acceptable electronic communication form), in lieu of paper form, to the email address provided herein. Standard disclosures include New Account, Checking Account, Fund Availability, and Fee Schedule Disclosures. These are NOT eStatements and no personal account information is included in these standard Disclosure communications. WCTFCU Disclosures are also available @ wctfcu.com. For a paper copy, print out the email, print it off of our website, call to request a mailed copy, or visit a branch. By signing below, signee (Member) accepts the terms of the WCTFCU Electronic Disclosures Agreement.

X Member Signature

Designation of Life Insurance Beneficiary

The Designation shall be effective only when delivered and filed with the Credit Union duly executed by an insured member and during the lifetime of the beneficiary designated Account Number

being a WCTFCU Member, do hereby designate (beneficiary's name) of (address, city, state, zip)

as my beneficiary, if living, to receive any and all sums of money, herein called "Insurance Proceeds", paid under and by virtue of the terms and conditions of the Group Insurance Policy, Credit Union Life Savings Insurance (also called Life Savings Insurance) of the Minnesota Life Insurance Company to the said Credit Union. This designation takes precedence over any earlier designation wherever and however made. I hereby reserve the right to change the beneficiary herein designated. Payment of Insurance Proceeds under the terms of the policy shall discharge the Credit Union from any and all liability to the extent of such payment.

X Member Signature

Federal Bank Secrecy & Anti-Terrorism Acts: To assist the U.S. government in its efforts to halt money laundering and the funding of terrorism, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. When you open an account, we will ask for your name, address, date of birth, and other information that will identify you including your driver's license or other identifying documents.

| INTERNAL USE ONLY Date of Membership | | | | | | |
|--------------------------------------|----------------|-------------|--|--|--|--|
| Form of ID | | Opened by | | | | |
| OFAC | _ ChexSystems_ | Referred by | | | | |

Waterbury CT Teachers Fec P.O. Box 2121 Waterbury, CT 06722-9951

BUSINE CTCT 06722-995 **TEACHERS** FEDERAL CREDIT UNION MAIL TERBURY CT

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Products & Services continued

Membership Application

Join U

Loans Very competitive rates, low/no-fees

- ☐ Auto Loans New & Used Car Loans. Refinance existing loans. Lease-style Loan.
- ☐ Motorcycle, Boat & RV Loans New & Used
- ☐ Personal Loans & Lines of Credit
- ☐ **Home Loans** Mortgages, Home Equity Loan(s), HELOC, Mortgage Accelerator Loan
- ☐ **Student Loans** Undergraduate, Graduate, Refinance & Consolidation

Services

- ☐ Free Credit Score, Credit Report & Credit Alerts
- □ Online Banking Access accounts, transfer funds, pay bills, see eStatements, check daily credit score & monthly report, set alerts, etc.
- □ WCTFCU App Access your accounts, deposit checks, Person 2 Person Pay (P2P), transfer funds, track spending & more!
- □ wctfcu.com Calculators, online applications, rates, car buying tools, financial literacy, FAQs & more.
- □ **Direct Deposit** Arrange with your HR Department or Pension Account for direct deposits.
- ☐ **Financial Planning & Workshops** Free, without sales or pressure... for Members only.
- ☐ **Scholarships** Granted annually to graduating High School seniors.

Questions? Call, Click, or Stop by!

Federally Insured by NCUA





773 Straits Turnpike

info@wctfcu.com (2) 800.992.2226

110 Federal Road Danbury, CT 06811



Empowering Members for Financial Success.



203.758.9500

203.791.1117

Welcome!

The Waterbury CT Teachers Federal Credit Union (WCTFCU) is a member-owned & directed, full service, not-for-profit, financial institution.

Founded in 1934 by teachers, WCTFCU has been a trusted place to save, borrow & manage money for over 88 years. Our volunteer Board of Directors is comprised of current & retired educators from the schools we serve.

The Credit Union offers highly competitive financial products & services with branches located in Middlebury & Danbury as well as digital account access through online and mobile banking.

Membership is an added benefit of your employment.

Our 20,000+ Membership includes current, former & retired teachers, staff & administrators who are/were employed by the Board of Education, private & parochial schools, and universities in the 28 CT towns we serve and their immediate family members!

WCTFCU Members receive up to \$2,000 in free life insurance, and up to \$30,000 in additional life insurance is available on all qualified loans. Visit our website for details.

Apply Today!

Online @ wctfcu.com with our secure Membership Application. Transfer the required \$5.00 minimum deposit, then upload a copy of your Driver's License*.

Paper Application Complete the form, make a copy of your Driver's License* & write a check to WCTFCU (\$5.00 minimum).

If you are also opening a Checking Account, please send in \$10.00 (\$5.00 to open a Savings/\$5.00 to open a Checking)

Detach and fold form, enclose check & copy of License*, tape and mail postage-free, or bring to a branch.

Contact Us: 800.992.2226

*or U.S. government issued photo ID

Products & Services

Checking Accounts No Fees! Earn Interest*! Visa® Debit Card. ATM fee reimbursement*. eStatements.

☐ Regular Checking ☐ A+ Checking

□ InTune Checking earn iTunes® credits

*Respective checking account type details, ATM fee reimbursement cap & more @ wctfcu.com.

Savings & Club Accounts

- ☐ Share Savings This account establishes your WCTFCU membership.
- ☐ IRAs & CDs/Share Certificates Regular and IRA certificates to help you save money.
- ☐ Money Market Accounts Offer a higher return and give immediate access to your money, with check writing privileges. Tiered rate structure; dividend rate increases with balance increase.
- ☐ Savings & Club Accounts Vacation, Holiday & Summer Accounts help you focus your saving efforts.
- ☐ Youth Accounts The Head-Start Savings account offers 0-17 year olds our highest interest rate for funds up to \$1,000/account. WCTFCU deposits \$10 into Head Start accounts opened prior to baby's 1st birthday. We annually select a \$25, \$50 & \$100 winner from among the prior year's new accounts opened for 0-1 year olds.

4 Visa® Credit Cards: Low Fixed Rates from 8% APR** **No Fees!** No Annual Fee. No-fee Balance Transfers & Cash Advances. Digital Wallet friendly. Contactless Payment. Security App to monitor & manage cards.

- ☐ Cashback 1% Cash Back on all purchases!
- □ **Platinum** Rewards Points for gifts, travel & more.
- ☐ **Gold** Lowest available interest rate.
- ☐ **Student** Lower credit limit; learn to responsibly use credit.

Introductory Offer Pay only 2.99% APR** for 12 months on balances transferred from other credit cards during first year.

**Annual Percentage Rate (APR)

Over

X Sianature

Membership Application

| | | | I and the second | | |
|--|--------------------------|-------|--|--|--|
| Savings Account (Membership / Share) | | | Checking Account select one: | | |
| Name | | | Name | | |
| SSN/TIN | | | SSN/TIN | | |
| Primary Phone | 🗆 Cell 🛚 | □Home | Checking Account Ownership select of | | |
| Mother's Maiden Name | | | | | |
| Street/Town/State/ZIP | | | Debit Card □ Yes □ No | | |
| | | | Provide Overdraft Protection from n | | |
| Email Personal/Home | | | Print my Primary Phone on Checks [| | |
| Oriver's License State/# | | | X Signature | | |
| Employer | | | | | |
| Fitle/Position | | | Agreement I/we have read and agree to Agreement, the Checking Account Agree | | |
| Eligibility (School / Family member na | ame) | | in the Reg CC & E Bulletins, and acknow available at wctfcu.com. If I am also apply | | |
| Savings Account Ownership select on | e: □Individual □Joint | | with the Online Banking Agreement. I a | | |
| Custodian (for minor under 18) | □ Trust (separate agreem | nent) | for any transactions completed through amount of any recurring payment or trans | | |

□ Regular □ A+ □ InTune Date of Birth ne: □ Individual □ Joint my Share Savings Account \square Yes \square No □ Yes □ No Date

the terms in the Electronic Funds Transfer ement and ATM Card Disclosures set forth ledge receipt of all disclosure statements ying for Online Banking, I agree to comply uthorize WCTFCU to charge my account the use of Online Banking, including the fer that I make. I agree that sufficient funds must be available in my account on the date I schedule payments and for all of my scheduled payments.

Application Agreements MUST be signed on reverse side of this page. OVER

| Joint/Custodian/Tr | ustee (optional) | \square Savings | \square Checking |
|--------------------------|-------------------------|-------------------|--------------------|
| Name | | | |
| SSN/TIN | Dat | e of Birth _ | |
| Primary Phone | | | |
| Mother's Maiden Name | | | |
| Street/Town/State/ZIP | | | |
| | | | |
| Email Personal/Home | | | |
| Driver's License State/# | | | |
| X Primary Signature | | Date | |
| X Joint Signature | | Date | |
| | For additional Joint (| Owners, use a | dditional form. |

Date

| Quick Loan Application (optional) | | | |
|-----------------------------------|------------------------|--|--|
| Name | | | |
| | Best time to call | | |
| Primary Phone | | | |
| Home Owner ☐ Yes ☐ No | Current Property Value | | |
| Loan Amount | Purpose of Loan | | |
| | | | |
| Employer | | | |
| Length of Employment | Annual Salary | | |
| | | | |

6/10/22