



# Johnstown School Employees Federal Credit Union

## Membership Form

### **Important Information About Procedures for Opening a New Membership Account**

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 to you: When you open a membership account, we will ask for your name, address, date of birth, social security number, and other information that will allow us to identify you. We may also ask to see your driver's license and/or other identifying documents.

|   |                |                   |              |          |
|---|----------------|-------------------|--------------|----------|
| First Name  | Middle Name    | Last Name         |              |          |
| Street  |                | City              | State        | Zip Code |
| Home Phone  | Business Phone |                   | Mobile Phone |          |
| Social Security Number                                | Birth Date     | E-Mail            |              |          |
| Member Employer                                       |                | Member Occupation |              |          |
| Driver's License Number/State/Issue & Expiration Date |                |                   |              |          |

### **Membership Eligibility**

- I am eligible for membership due to the fact that I am employed in the educational field in either Cambria or Somerset Counties.

Name of County: \_\_\_\_\_

Name of School District: \_\_\_\_\_

- I am a family member of \_\_\_\_\_ Relationship \_\_\_\_\_ Account Number \_\_\_\_\_

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return this form with a copy of your driver's license and a \$5.00 check to "open your account" to:

JSEFCU  
738 Viewmont Ave  
Johnstown, PA 15905

FOR CREDIT UNION USE ONLY

Member Number: \_\_\_\_\_ Date Opened: \_\_\_\_\_