

1 Member Name _____

2 Account Number _____

1. Please tell us your name.



ACCOUNT CHANGE CARD

Add Joint Owner

2. Please place your member number here. If you don't know it, we can take care of this for you.

3. In this section, please just tell us your current information. This will help us serve you better and keep us in compliance with federal laws. The second side is for any current joint owners.

3 SSN/TIN _____

Member Name _____

Physical Address _____

City/State/Zip _____

Mailing Address _____

City/State/Zip _____

Home Phone _____

Work Phone _____

Cell Phone _____

E-Mail _____

Birthdate _____

Driver Lic. # _____ ST _____ Exp _____

Employer _____

Occupation _____

3 SSN/TIN _____

Joint Owner Name _____

Physical Address _____

City/State/Zip _____

Mailing Address _____

City/State/Zip _____

Home Phone _____

Work Phone _____

Cell Phone _____

E-Mail _____

Birthdate _____

Driver Lic. # _____ ST _____ Exp _____

Employer _____

Occupation _____

4. Here, please tell us about the person being added. It is important that all of these fields are filled out. There is a second column for any additional joint owners.

5. Please have every owner sign here. It is important that we have every owner on one piece of paper acknowledging the addition.

ADDITION OF JOINT OWNER(S)

4 SSN/TIN _____

Joint Name _____

Physical Address _____

City/State/Zip _____

Mailing Address _____

City/State/Zip _____

Home Phone _____

Work Phone _____

Cell Phone _____

E-Mail _____

Birthdate _____

Driver Lic. # _____ ST _____ Exp _____

Employer _____

Occupation _____

4 SSN/TIN _____

Joint Name _____

Physical Address _____

City/State/Zip _____

Mailing Address _____

City/State/Zip _____

Home Phone _____

Work Phone _____

Cell Phone _____

E-Mail _____

Birthdate _____

Driver Lic. # _____ ST _____ Exp _____

Employer _____

Occupation _____

6. When complete, simply send or bring this back to us with a copy of 1 ID for every signer on the account. We will then be able to follow up and fine-tune your new account however you like.

*For more info, please visit us at 303-740-7063 or online at ArapahoeCU.org. We are happy to help you with absolutely anything you might have questions on.

Please note: Approval is required on some items and rates are subject to change without notice. It is possible, though unlikely, for the addition of a joint owner to change what products are available.

AUTHORIZATION

If multiple signatures are subscribed hereto, Arapahoe Credit Union is hereby authorized to recognize any of these signatures shown on this card in payment of funds or transaction of any business for the member account as described in the Membership and Account Agreement. By signing, I/we agree to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings, Rate and Fee Schedule, Funds Availability Policy Disclosure, if applicable, and to any amendment the Credit Union makes from time to time which are incorporated herein. I/we authorize you to check account, credit, and employment history and obtain a credit report from third parties, including credit reporting agencies, to verify eligibility for the accounts and services I/we requested.

The USA Patriot Act requires us to obtain, verify and record information that identifies each person.

5 X _____ 5 X _____

Signature (Account Owner) Date Signature (Joint Owner) Date

5 X _____ 5 X _____

Signature (Joint Owner) Date Signature (Joint Owner) Date

FOR CREDIT UNION USE ONLY

Date: _____ Insight ID: _____ OFAC: _____

Updated By: _____ ChexSystems: _____

Membership Officer: _____ CBR: _____

*Please attach a copy of Identification for all Account Owners.