

Last Name    First Name    Initial  Date of Birth       Member Account Number

Home Address         City     State  Zip

E-mail Address      Home Phone    Work Phone and Ext.

Check any item to sign up	Description	Regular Monthly Fee
Home Banking <input type="checkbox"/> <input type="checkbox"/>	Manage all your accounts through our secure Central@net server, 24/7.	free
Bill Payer Service <input type="checkbox"/>	Make any one-time or recurring payments you wish. <i>Requires checking.</i>	free
ATM Card <input type="checkbox"/> <input type="checkbox"/>	Make withdrawals and payments anytime, anywhere in the country.*	free
or		
Debit Card <input type="checkbox"/> <input type="checkbox"/>	Works like a check, anywhere VISA is displayed. <i>Requires checking.*</i>	free
Issue additional cards in the following names: <i>Must be existing joint owners on my account</i>		
	Existing Joint Owner Name <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Social Security No. <input type="checkbox"/>	
	Existing Joint Owner Name <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Social Security No. <input type="checkbox"/>	

\*5 free ATM withdrawals per month. Extras are \$1.00 each. Unlimited point-of-sale transactions. For full details, please see our Truth-in-Savings and Electronic Services Disclosures and Fee Schedule.

Please read carefully before signing: You are applying to E-Central Credit Union for the service(s) indicated above. By signing below, you acknowledge and agree to the following:

1. You agree to be bound by the terms and conditions applicable to each service requested, as contained in the Truth-In-Savings Disclosure and Electronic Services Disclosure.
2. All funds paid into any account shall be considered as being held by each owner of that account equally, with the right of survivorship and regardless of net contribution, and that the Credit Union is under no obligation to inquire as to the source of any contribution.
3. The Credit Union is authorized to recognize any of the following signatures for transaction of any business on any account on which that party is named as an owner.

**Primary Owner Signature**     **Date**

**Joint Owner Signature (if applicable)**     **Date**

**Joint Owner Signature (if applicable)**     **Date**

phone: 626.799.6000 fax: 626.799.6950 web: www.ecentralcu.org

**Pasadena Office:** 990 S. Fair Oaks Ave, Pasadena, CA 91105 **Los Angeles Office:** 5770 S. Eastern Ave, Los Angeles, CA 90040