



Pelican State
credit union

P.O. Box 40088
Baton Rouge, LA 70835

Congratulations!

**You're now eligible for membership with Pelican State Credit Union,
the credit union of choice for your employer.**

What is a credit union?

Credit Unions are not-for-profit financial institutions where each member shares ownership in the company. Member-owners are our partners and the company's earnings are passed along to them in the form of higher dividends and lower loan rates.

Why am I eligible to join?

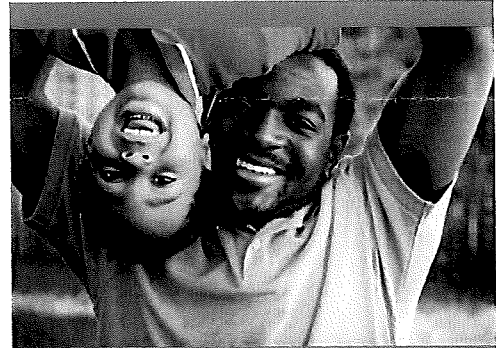
You are eligible for Pelican membership because your company is one of our Select Employer Groups (SEGs). This means that your employer has agreed to partner with us in offering you credit union membership and all the benefits that come with it. If you become a member, your immediate family members are also eligible to join.

Why should I join Pelican?

We offer high quality products and the latest technology in online banking and security. We are dedicated to serving the 'Little Guy' – hardworking Americans of modest means who just can't jump through assorted hoops or stomach high fees.

How do I become a member?

It's easy! 1.) Fill out an application form from your local branch or open your account online at www.pelicanstatecu.com.
2.) Sign up for payroll deduction or direct deposit and start enjoying the benefits of membership.



We Offer Convenient Products & Services!

**Get Paid to Bank Here with
Reward Checking Accounts**

**Chat with Pelican's Online
MyBranch Representatives**

**Open Accounts and Apply
for Loans, Mortgages &
Visa Credit Cards Online**

**Download our Smart Phone
App with Remote Deposit**

**Work to Build Your Credit
with Free Credit Counseling**

*A one time, lifetime \$5 membership fee will be assessed upon first deposit. A \$5 minimum balance is required to maintain active status.

1-800-351-4877
www.pelicanstatecu.com

Your Credit Union of *Choice*sm



P.O. Box 40088
Baton Rouge, LA 70835
Phone: 225-408-6100 Fax: 225-408-6200

Application for Membership

Member Number: _____

General Information

Name: _____ Social Security Number: _____

Home Phone: _____ Cell: _____ DOB: _____ Gender: M _____ F _____

DL or ID#: _____ State: _____ Expiration: _____

Physical Address: _____ City: _____ State: _____ ZIP: _____

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Email: _____ Mother's Maiden Name: _____

Personal Contact Name: _____ Relationship: _____ Phone: _____

(Personal contact cannot live in same household or be someone who is joint on this membership)

Employer: _____ Work Phone: _____

How did you hear about Pelican State Credit Union? _____

Membership Eligibility

How are you eligible for membership? _____

Joint Owner Information (If Applicable)

Name: _____ Social Security Number: _____

Home Phone: _____ Cell: _____ DOB: _____ Gender: M _____ F _____

DL or ID#: _____ State: _____ Expiration: _____

Physical Address: _____ City: _____ State: _____ ZIP: _____

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Email: _____ Mother's Maiden Name: _____

Employer: _____ Work Phone: _____

Second Joint Owner Information (If Applicable)

Name: _____ Social Security Number: _____

Home Phone: _____ Cell: _____ DOB: _____ Gender: M _____ F _____

DL or ID#: _____ State: _____ Expiration: _____

Physical Address: _____ City: _____ State: _____ ZIP: _____

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Email: _____ Mother's Maiden Name: _____

Employer: _____ Work Phone: _____

Eligibility for Membership

Pelican State Credit Union membership eligibility through an immediate family member is defined as a parent, spouse, spouse's parent, child, child's spouse, sibling, sibling's spouse, grandparent, grandchild, step relationships and adoptive relationships.

If joining Pelican State Credit Union through an association, additional fees are required as defined by the association.

Tax Information Certification: By signing this application, I certify under penalties of perjury that the following statements are true.

1. I am a US citizen or other US person
2. The Social Security Number (SSN) / Employer Identification Number (EIN) shown is my/the correct identification number and
3. I am **not**, subject to back up withholding because I am exempt or I have not been notified by the IRA that I am subject to backup withholding as a result of a failure to report all dividends or interest, or because the IRA has notified me that I am no longer subject to backup withholding.

If the above statements do not apply to me, I must select option A or B below:

(A) I am subject to backup withholding (B) I am not a United States citizen or resident (complete W-8 BEN form)

U.S. Patriot Act

According to the USA Patriot Act, we are required to obtain, verify and record ID information from members applying for or opening new accounts or services. Information that we are required to obtain may include unexpired driver's license with name, current mailing and residential address, date of birth, current employer issued ID or government issued ID. Additional data may be gathered depending on type of account opened. Information on existing members will be gathered as new or additional services are used. Confidentiality of the info gathered by Pelican State Credit Union will be maintained as required under the Privacy Act.

By signing below, I/we agree to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Disclosure, Funds Availability Policy Disclosure, if applicable, and to any amendment the credit union makes from time to time which are incorporated herein. I/We acknowledge receipt of a copy of the agreements and disclosures applicable to the accounts and services requested herein. If an access card or EFT service is requested and provided, I/we agree to the terms of and acknowledge receipt of the Electronic Funds Transfers Agreement and Disclosure. **The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.** I/We further agree to authorize Pelican State Credit Union to investigate my/our credit worthiness, credit history and financial responsibility through any credit bureau or account verification network while a member of the credit union. I also understand by reviewing my credit, this allows Pelican State Credit Union the opportunity to offer products that may benefit my financial needs. By signing below, I/we also certify the above information is true and correct.

1st Owner Signature: _____ Date: _____

2nd Owner Signature: _____ Date: _____

3rd Owner Signature: _____ Date: _____

For Internal Use

| Savings Accounts | Checking Accounts | Debit Cards | Additional Information |
|---|---|---|------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> Choice Checking | <input type="checkbox"/> Savings Debit Card (ATM) | _____ |
| <input type="checkbox"/> Regular | <input type="checkbox"/> Kasasa Tunes | <input type="checkbox"/> Debit Card | _____ |
| <input type="checkbox"/> Vacation | <input type="checkbox"/> Kasasa Cash | | _____ |
| <input type="checkbox"/> Freedom | <input type="checkbox"/> Kasasa Cash Back | | _____ |
| <input type="checkbox"/> Kasasa Cash Saver | | | _____ |
| <input type="checkbox"/> Kasasa Cash Back Saver | | | _____ |
| <input type="checkbox"/> Christmas Club | | | _____ |
| | | | _____ |
| | | | _____ |