

Youth Membership Application



IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW 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 for you:** When you open an account, we will ask you for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

MEMBERSHIP OF MINORS: If membership is being established by a Minor (an individual under the age of 18), the Minor may request a Northwest account access card and/or Northwest "electronic services" (Telephone Banking/Online Banking), or open a checking account and/or request a FirstCard Visa® Platinum credit card, provided that a responsible adult is Joint Owner on the account. The adult Joint Owner is responsible for the Minor's actions regarding the use of any of the aforementioned services and indemnifies and holds harmless Northwest from any such use.

A: PRIMARY OWNER OF ACCOUNT AND ELIGIBILITY (Please print)

Name (First, MI, Last)		Social Security Number (Tax Identification Number, if applicable)		Birthdate (MM/DD/YYYY)	
Residential Address (Cannot be a P.O. box)			City	State	ZIP Code
Mailing Address (If different from residence)			City	State	ZIP Code
Home Phone Number	Work Phone Number	Mobile Phone Number*	Email Address		
Full Driver's License or State ID Card Number	State	Other Form of Identification	ID Issue Date (MM/DD/YYYY)	ID Expiration Date (MM/DD/YYYY)	
Employer	Occupation/Job Title	Approximate Annual Income \$	Source of Deposits, if Other than Payroll (i.e., pension, Social Security)		

I am a:

U.S. Citizen Permanent Resident Alien Non Resident Alien

How will you use this account? (i.e., savings, primary expenses)

Do you plan to use your account to conduct international transactions such as incoming or outgoing international wires or receive international ACH credits?

Yes No

Are you or any member of your family a public official?
(Person(s) who are or have been entrusted with prominent public functions, i.e., heads of government, senior politicians, senior government, judicial or military officials)

Yes No

I am eligible to join in the following way
(i.e., Federally Affiliated, Family, Community Partner or Employer)

How did you hear about us? (Select one)

Family or friend My employer Google search Internet search

Other: _____

B: PRODUCTS/SERVICES DESIRED – Choose your Northwest products and services by checking the appropriate boxes.

<p><input checked="" type="checkbox"/> Primary Savings Account REQUIRED for membership, with a \$1.00 minimum deposit</p> <p><input checked="" type="checkbox"/> Membership in Youth Club (Based on Minor's age; ask for your new member packet with gift)</p> <p><input type="checkbox"/> ATM Card (Parental signature required for members under 18)</p> <p><input type="checkbox"/> Issue ATM Card to Joint Owner(s) (Cards will be issued for all Joint Owners, if selected)</p> <p><input type="checkbox"/> Checking Account Adult Joint Owner REQUIRED</p> <p><input type="checkbox"/> ATM/Debit Card (Parental signature required for members under 18)</p> <p><input type="checkbox"/> Issue ATM/Debit Card to Joint Owner(s) on Account (Cards will be issued for all Joint Owners, if selected)</p> <p><input type="checkbox"/> Dividend Rewards Checking (<input type="checkbox"/> with Rewards Savings)</p> <p><input type="checkbox"/> Debit Rewards Checking (<input type="checkbox"/> with Rewards Savings)</p> <p><input type="checkbox"/> Choice Checking</p> <p><input type="checkbox"/> Elite Checking</p>	<p><input type="checkbox"/> Overdraft Protection Select overdraft source(s)</p> <p><input type="checkbox"/> Primary Savings Account</p> <p><input type="checkbox"/> Rewards Savings</p> <p><input type="checkbox"/> Secondary Savings Account</p> <p><input type="checkbox"/> Money Market Account</p>	<p><input type="checkbox"/> Online Banking</p> <p><input type="checkbox"/> Secondary Savings Account</p> <p><input type="checkbox"/> Money Market Account</p> <p><input type="checkbox"/> Savings Club Account</p> <p>Certificate Account(s)</p>
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*If you provide a mobile phone number, Northwest has your permission to place calls or text messages, including autodialed and prerecorded message calls, to that number. Message and data rates may apply.

C: JOINT OWNERS OR BENEFICIARIES – Northwest may limit transactions conducted by Joint Owner(s).

Joint Owners and Beneficiaries are not eligible for the full privileges of membership. All accounts are owned jointly with right of survivorship. To add a Joint Owner and/or Beneficiary, select accounts below or Joint Owner/Beneficiary will be added to all youth accounts.

<input type="checkbox"/> Joint Owner #1 or <input type="checkbox"/> Beneficiary #1										<input type="checkbox"/> All Accounts		<input type="checkbox"/> Checking		<input type="checkbox"/> Savings		<input type="checkbox"/> Money Market		Certificate	
Name (First, MI, Last)					Relationship to Minor			Social Security Number (TIN, if applicable)			Birthdate (MM/DD/YYYY)								
Address (Cannot be a P.O. box)					City				State		ZIP Code								
Home Phone Number		Work Phone Number		Mobile Phone Number*		Email Address													
Occupation/Job Title			Account Number		Full Driver's License or State ID Card Number		State	ID Issue Date (MM/DD/YYYY)		ID Expiration Date (MM/DD/YYYY)									
Approximate Annual Income \$		Source of Deposits, if Other than Payroll (i.e., pension, Social Security)				I am a:													
										<input type="checkbox"/> U.S. Citizen		<input type="checkbox"/> Permanent Resident Alien		<input type="checkbox"/> Non Resident Alien					
Do you plan to use your account to conduct international transactions such as incoming or outgoing international wires or receive international ACH credits?					Are you or any member of your family a public official? (Person(s) who are or have been entrusted with prominent public functions, i.e., heads of government, senior politicians, senior government, judicial or military officials)														
					<input type="checkbox"/> Yes <input type="checkbox"/> No					<input type="checkbox"/> Yes <input type="checkbox"/> No									

<input type="checkbox"/> Joint Owner #2 or <input type="checkbox"/> Beneficiary #2										<input type="checkbox"/> All Accounts		<input type="checkbox"/> Checking		<input type="checkbox"/> Savings		<input type="checkbox"/> Money Market		Certificate	
Name (First, MI, Last)					Relationship to Minor			Social Security Number (TIN, if applicable)			Birthdate (MM/DD/YYYY)								
Address (Cannot be a P.O. box)					City				State		ZIP Code								
Home Phone Number		Work Phone Number		Mobile Phone Number*		Email Address													
Occupation/Job Title			Account Number		Full Driver's License or State ID Card Number		State	ID Issue Date (MM/DD/YYYY)		ID Expiration Date (MM/DD/YYYY)									
Approximate Annual Income \$		Source of Deposits, if Other than Payroll (i.e., pension, Social Security)				I am a:													
										<input type="checkbox"/> U.S. Citizen		<input type="checkbox"/> Permanent Resident Alien		<input type="checkbox"/> Non Resident Alien					
Do you plan to use your account to conduct international transactions such as incoming or outgoing international wires or receive international ACH credits?					Are you or any member of your family a public official? (Person(s) who are or have been entrusted with prominent public functions, i.e., heads of government, senior politicians, senior government, judicial or military officials)														
					<input type="checkbox"/> Yes <input type="checkbox"/> No					<input type="checkbox"/> Yes <input type="checkbox"/> No									

D: SOCIAL SECURITY NUMBER/TAX IDENTIFICATION NUMBER – Certification and backup withholding information

Under penalties of perjury, I certify that: (1) the Social Security Number (SSN)/Taxpayer Identification Number (TIN) listed on page 1 is my correct taxpayer identification number (or I am waiting for one to be issued); and (2) I am not subject to backup withholding because (a) I am exempt, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) because the Internal Revenue Service (IRS) has notified me that I am no longer subject to backup withholding; and (3) I am a U.S. citizen or other U.S. person. For federal tax purposes, you are considered a U.S. person if you are: an individual who is a U.S. citizen or U.S. resident alien; a partnership, corporation, company, or association created or organized in the United States or under the laws of the United States; an estate (other than a foreign estate); or a domestic trust (as defined in Regulations section 301.7701-7); and (4) the Foreign Account Tax Compliance Act (FATCA) code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Enter FATCA Code(s) here: _____

I am subject to backup withholding.

Instructions: Certification (2) above does not apply if this box is checked. You must check this box 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.

I am not a U.S. citizen or resident alien (including green card holder); for income tax purposes I must complete a W-8BEN.

Instructions: The certification paragraph above does not apply if this box is checked. You must provide a completed IRS form W-8BEN if this box is checked.

E: SIGNATURE(S) – Please include a clear copy of photo ID.

I/We hereby certify eligibility for membership and make application for membership in and agree to be bound by and conform to the by-laws, rules, regulations and policies now in effect and as amended or adopted in the future by Northwest. I/We authorize Northwest to obtain a consumer credit report in establishing this account or other related financial services as submitted now or in the future. By signing below, I/we certify that all the information on this Application is true and correct under penalty of perjury and acknowledge receipt of the "Account Agreements and Disclosures," "Funds Transfer Agreement" and "Fee Schedule."

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Primary Owner Signature X	Date
Joint Owner #1 Signature X	Date
Joint Owner #2 Signature X	Date

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CREDIT UNION USE ONLY

Account Number	CU Representative	Date
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