Membership and Personal Account Signature Card

Bright Star CREDIT UNION®

Check service requested: ❏ NEW MEMBERSHIP
❏ OPEN NEW ACCOUNT(S)

Member Number_____
This form will supersede any others on file.

1 PRIMARY MEMBER INFORMATION

Last Name_____First _____Initial____Date of Birth _____

Mailing Address _____

City _____State _____Zip _____

Permanent Address (If different) _____

City _____State _____Zip _____

SSN _____Drivers License#_____State _____

Home Phone _____Work Phone _____Cell Phone _____

E-mail Address _____Mother's Maiden Name _____

Employer _____Occupation _____

Pass Phrase for ID Purposes_____How did you hear about us? _____

2 SOURCE OF ELIGIBILITY FOR MEMBERSHIP

Check all that apply:

- ❏ Broward
- ❏ Collier
- ❏ Lee
- ❏ Martin
- ❏ Miami-Dade
- ❏ Palm Beach
- ❏ St. Lucie

❏ I live in: (select county on left). Please provide a valid ID. If your current address does not match your valid ID, please include proof of residency that reflects your current address along with your ID.
Examples: utility bill or voter registration card

❏ I work in: (select county on left). Please provide proof of employment.
Examples: employee ID or most recent pay stub

❏ I attend school in: (select county on left). Please provide proof of attendance.
Examples: student ID or transcript

❏ I am related to an existing member:

Name:_____Relationship:_____

Member #_____

❏ I am related to someone eligible for membership:

Name:_____Relationship:_____

Address: _____

❏ Other: (please explain)_____

Please copy and attach all documentation required for proof of eligibility.

3 JOINT OWNER

Last Name_____First _____Initial____Date of Birth _____

Mailing Address _____

City _____State _____Zip _____

Permanent Address (If different) _____

City _____State _____Zip _____

SSN _____Drivers License#_____State _____

Home Phone _____Work Phone _____Cell Phone _____

E-mail Address _____Mother's Maiden Name _____

Employer _____Occupation _____

Pass Phrase for ID Purposes_____How did you hear about us? _____

4 CHOOSE YOUR ACCOUNTS

Check each account or service you are requesting from BrightStar Credit Union.

- ☑ BrightStar CU Membership (Savings) _____
- ❑ FREE Checking with e-Statements _____
  (Personal use only – ask us about business accounts)
- ❑ Visa Check Card / ATM Card _____
- ❑ Free Online Banking / Call24 _____
- _____ ❑ Wish Account **Term/Maturity** _____
- _____ ❑ Other _____

Statement Options (select one):

- ❑ e-Statements FREE

  OR

- ❑ Mailed paper statements Fee may apply

Estimated average monthly deposit $_____

Estimated average monthly balance $_____

Additional Notes:

_____

_____

_____

_____

_____

_____

_____

_____

_____

5 PAY-ON-DEATH BENEFICIARY(IES)

LAST NAME _____FIRST NAME _____INITIAL _____

RELATIONSHIP _____SSN_____DOB _____

❑ ALL ACCOUNTS or _____

LAST NAME _____FIRST NAME _____INITIAL _____

RELATIONSHIP _____SSN_____DOB _____

❑ ALL ACCOUNTS or _____

6 SIGNATURES

Please read carefully before signing:

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 an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you.

By signing this application, I (we) warrant that all information set forth in this Membership and Account Signature Card is true and correct. The Primary Member named above hereby makes application for membership in BrightStar Credit Union ("Credit Union") and agrees to be bound by all terms and conditions of Credit Union membership as amended by Credit Union from time to time. I (we) authorize Credit Union and its agents to obtain and verify information related to me(us) and my(our) deposit, employment, income and credit history, including, without limitation, consumer reports from consumer reporting agencies, at any time hereafter as determined by Credit Union in Credit Union's sole discretion. I (we) acknowledge receipt of and agree to be bound by the Credit Union Consumer Account Disclosures and all other agreements and disclosures provided to me(us) by Credit Union as amended by Credit Union from time to time in Credit Union's sole discretion.I request and agree Credit Union's Online Banking service and that Credit Union provide me all disclosures, agreements, contracts, periodic statements, receipts, modifications, amendments, and all other evidence of Credit Union's transactions with me or on my behalf electronically (hereinafter all such documentation is referred to as "electronic record(s)"). Credit Union may provide me any or all electronic records at any e-mail address provided by me to Credit Union or Credit Union may post any or all electronic records in Online Banking available at Credit Union's website www.bscu.org. If Credit Union posts electronic records on Online Banking, Credit Union will send a message to my e-mail address alerting me of the posting of such records. If Credit Union posts electronic records on Online Banking, the electronic records will remain available for at least ninety (90) days. Credit Union reserves the right to send any or all records to me in paper form to my current postal mailing address in Credit Union's file. I have a right to receive a paper copy of any of these electronic records only if applicable law specifically requires Credit Union to provide such documentation. I may withdraw my consent and revoke my agreement to receive records electronically. To request a paper copy or to withdraw my agreement to receive electronic records, I must go to Online Banking, sign on to the e-Statement application, then select "change registration," and then "discontinue accounts". Select the account(s) I wish to discontinue, and click "discontinue." To receive electronic records, I need a valid e-mail address, a computer with internet access and Adobe Acrobat Reader (which can be downloaded from the e-Statement registration screen in Online Banking). By requesting or viewing any electronic funds transfers, Internet Banking, other electronic records, services or transactions, by submitting any application or agreement to Credit Union electronically or by e-mailing Credit Union, I represent that I have such equipment and software and that I can download, access, read, review, print and store the electronic records Credit Union provides to me. I acknowledge and agree that the Internet is considered inherently insecure. Therefore, I agree that Credit Union has no liability to me whatsoever for any loss, claim or damages arising or in any way related to Credit Union's response(s) to any e-mail or other electronic communication which Credit Union in good faith believes I have submitted to Credit Union. Credit Union has no duty to investigate the validity or to verify any e-mail or other electronic communication. Credit Union may respond to an e-mail communication provided by me through Online Banking, the address provided with the communication or any other e-mail address provided by me to Credit Union. Any e-mail returned to Credit Union as undelivered may be re-sent to me at any other e-mail address that Credit Union has in my file. Although Credit Union has no obligation to do so, Credit Union reserves the right to require authentication of e-mails or electronic communications. The decision to require authentication is in the sole discretion of Credit Union. Credit Union has no obligation, liability or responsibility to me or any other person or company if Credit Union does not act upon or follow any instruction to Credit Union if a communication cannot be authenticated to Credit Union's satisfaction.

X_____

PRIMARY MEMBER DATE

X_____

SIGNATURE OF JOINT OWNER DATE

BACKUP WITHHOLDING CERTIFICATION

Under penalty of perjury, I certify that: (1) I am a U.S. Person (including U.S. Resident Alien). (2) The tax identification number is correct for this account. (3) I am not subject to backup withholding due to failure to report interest and dividend income. **Certification Instructions:** You must initial below if you have been notified that you are currently subject to backup withholding for failure to report all interest and dividends on your tax return.

☐ <<Initial here **only** if you have been notified that you are currently subject to backup withholding for failure to report all interest and dividends on your tax return.

X_____

PRIMARY MEMBER

RETURN TO BrightStar Credit Union

BrightStar CU, PO Box 8966, Ft. Lauderdale, FL 33310-8966, along with a copy of each signer's drivers license or other valid identification. Federal law requires us to obtain, verify and record information that identifies each person who opens an account. Questions? Call (954)486-2728. Federally Insured by NCUA.

BrightStar Use Only ChexSystems℠ ❑ Yes ❑ No

Comments:_____

_____

Approved by _____

Disclosures: ❑ Mailed ❑ Delivered Initials _____Date _____

New Account Application Instructions

Section 1 and 2	Complete these sections in entirety.
Section 3	Complete if account is jointly owned.
Section 4	Choose your accounts and statement option. Your Membership includes a Savings Account (mandatory).
Section 5	Beneficiary (ies) – name(s) and relationship(s) (optional).
Section 6	All account owners must sign in ink. Primary owner must sign Account Agreement and Backup Withholding section.

Additional Important Information:

- Complete and sign your direct deposit form - BrightStar CU will send the form to your HR or payroll department. (optional)
- If opening a Checking Account, complete the Courtesy Pay Authorization form if applicable.
- Enclose a photocopy of driver's license or government issued ID for all account owners. This is required. (student IDs acceptable for minors). If your current address does not match the address on your driver's license, please submit a copy of a current utility bill or lease.
- Minor accounts (under 18 years of age) must have parent or guardian as joint owner. SSN numbers are required for all parties, with a copy of minor's social security card attached.

In case of any questions, you will be contacted by a BrightStar CU representative. Once you receive your Membership packet with account numbers in the mail, you may begin using your account.
Your Visa Check Card, if requested, will arrive within 10 business days. Please follow the instructions and activate your card plus enroll in Visa Scorecard.

954.486.BSCU (2728)
Toll Free 800.637.BSCU

Mailing Address for paper applications:
BrightStar Credit Union
Attn: Marketing Department
P.O. Box 8966
Fort Lauderdale, FL 33310-8966