



# REQUEST TO OPEN A CLUB ACCOUNT

A Club account is an account managed by members of a club or an association. Examples of organized groups that qualify for Club accounts are: political candidates, sports clubs, van pools, associations, high school reunion committees, and activity clubs.

## HELP US TO QUICKLY PROCESS YOUR REQUEST TO OPEN A CLUB ACCOUNT BY PROVIDING A FEW THINGS TO GET STARTED:

- Print and complete the Club Account Application located on [becu.org](https://becu.org).
- Gather the required documents and information (see below).

## DOCUMENTS REQUIRED:

- Club Account Application
- A copy of bylaws or meeting minutes stating who is authorized to be on the accounts. These do not need to be formal.
- Certification Regarding Beneficial Ownership of Legal Entity Members located on [becu.org](https://becu.org) (if the club/association is registered with the Washington Secretary of State website).

## IMPORTANT INFORMATION ABOUT OPENING A CLUB ACCOUNT:

- BECU requires home owners associations and churches to open accounts as businesses.
- Political candidates must be registered on the [pdc.wa.gov](https://pdc.wa.gov) website database prior to account opening.
- Available Club account types: Member Share Savings, Savings, Checking, Money Market, and Certificate of Deposit (CD).
- Club accounts are established using a Taxpayer Identification number (TIN) issued by the IRS, not an individual's Social Security number (SSN).
- Online Banking with eStatements and Bill Pay are available.
- All signers on a Club account must be 18 years or older.

## WHAT'S NEXT?

Return the completed application, required documents, and information by one of the following:

- In person to any BECU location. To find a location near you, visit [becu.org/locations](https://becu.org/locations).
- Fax to **206-805-5612**
- Mail to:

BECU

Account Servicing M/S 1094-2

PO Box 97050

Seattle, WA 98124-9750

Once we have received your request, a representative may contact you to review the information provided. If you have any questions, please call a BECU representative at **800-233-2328**. You can also send us a secure message using Messenger in Online and Mobile Banking.

# CLUB ACCOUNT APPLICATION AND CHANGE REQUEST



Welcome to Boeing Employees' Credit Union. Thank you for choosing BECU for your financial service needs. As a not-for-profit credit union, we are able to offer our members better rates, fewer fees, and more affordable financial services. Please complete, sign in ink, and return this form to apply for membership or to change information on your current account. If you have any questions, please contact a BECU representative at 800-233-2328.

New account    Close account    Change the following account: \_\_\_\_\_

## 1. Account Information

**Important information about procedures for opening a new account:** Federal law requires all financial institutions to help the government fight the funding of terrorism and money laundering activities by obtaining, verifying, and recording information that identifies each person who opens an account. What this means to you: When you open an account we ask 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.

CLUB OR ASSOCIATION NAME (as on file with IRS)		EIN / TIN
PHONE NUMBER	EMAIL ADDRESS	
STREET ADDRESS (required)		CITY
STATE / PROVINCE	ZIP / POSTAL CODE	COUNTRY
MAILING ADDRESS (if different from above)		CITY
STATE / PROVINCE	ZIP / POSTAL CODE	COUNTRY
MEMBERSHIP ELIGIBILITY		

## 2. Club / Association Authorized Signer Information

AUTHORIZED SIGNER NAME (1)				<input type="checkbox"/> Add <input type="checkbox"/> Remove	SSN / TIN
				<input type="checkbox"/> Retain	
HOME PHONE	WORK PHONE	MOBILE PHONE	DATE OF BIRTH	MOTHER'S MAIDEN NAME	
STREET ADDRESS				CITY	
STATE / PROVINCE		ZIP / POSTAL CODE		COUNTRY	
VALID PICTURE ID NUMBER	ID TYPE	ISSUE DATE	EXPIR. DATE	STATE & COUNTRY ISSUED	
EMPLOYMENT				EMAIL ADDRESS	
<input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Never Employed					
OCCUPATION / PREVIOUS OCCUPATION (if retired or unemployed)			EMPLOYER / PREVIOUS EMPLOYER (if retired or unemployed)		
AUTHORIZED SIGNER NAME (2)				<input type="checkbox"/> Add <input type="checkbox"/> Remove	SSN / TIN
				<input type="checkbox"/> Retain	
HOME PHONE	WORK PHONE	MOBILE PHONE	DATE OF BIRTH	MOTHER'S MAIDEN NAME	
STREET ADDRESS				CITY	
STATE / PROVINCE		ZIP / POSTAL CODE		COUNTRY	
VALID PICTURE ID NUMBER	ID TYPE	ISSUE DATE	EXPIR. DATE	STATE & COUNTRY ISSUED	
EMPLOYMENT				EMAIL ADDRESS	
<input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Never Employed					
OCCUPATION / PREVIOUS OCCUPATION (if retired or unemployed)			EMPLOYER / PREVIOUS EMPLOYER (if retired or unemployed)		

Continued on the next page.

## 2. Club / Association Authorized Signer Information (continued)

AUTHORIZED SIGNER NAME (3)				<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Retain	SSN / TIN
HOME PHONE	WORK PHONE	MOBILE PHONE	DATE OF BIRTH	MOTHER'S MAIDEN NAME	
STREET ADDRESS				CITY	
STATE / PROVINCE		ZIP / POSTAL CODE		COUNTRY	
VALID PICTURE ID NUMBER	ID TYPE	ISSUE DATE	EXPIR. DATE	STATE & COUNTRY ISSUED	
EMPLOYMENT <input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Never Employed			EMAIL ADDRESS		
OCCUPATION / PREVIOUS OCCUPATION (if retired or unemployed)			EMPLOYER / PREVIOUS EMPLOYER (if retired or unemployed)		
AUTHORIZED SIGNER NAME (4)				<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Retain	SSN / TIN
HOME PHONE	WORK PHONE	MOBILE PHONE	DATE OF BIRTH	MOTHER'S MAIDEN NAME	
STREET ADDRESS				CITY	
STATE / PROVINCE		ZIP / POSTAL CODE		COUNTRY	
VALID PICTURE ID NUMBER	ID TYPE	ISSUE DATE	EXPIR. DATE	STATE & COUNTRY ISSUED	
EMPLOYMENT <input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Never Employed			EMAIL ADDRESS		
OCCUPATION / PREVIOUS OCCUPATION (if retired or unemployed)			EMPLOYER / PREVIOUS EMPLOYER (if retired or unemployed)		

## 3. Account Type

Select all that apply.

**Member Share Savings Account**  
Issue card to:  Authorized Signer (1)  Authorized Signer (2)  Authorized Signer (3)  Authorized Signer (4)

**Savings Account**  
Issue card to:  Authorized Signer (1)  Authorized Signer (2)  Authorized Signer (3)  Authorized Signer (4)

**Checking Account**  
Issue card to:  Authorized Signer (1)  Authorized Signer (2)  Authorized Signer (3)  Authorized Signer (4)

**Money Market Account**  
Issue card to:  Authorized Signer (1)  Authorized Signer (2)  Authorized Signer (3)  Authorized Signer (4)

**CD Account**  
 How many months? \_\_\_\_\_  Add-To Option (Complete Account to Account Transfer form)  
 Close out CD upon maturity.  Transfer interest to another account.  
 Deposit funds to account number: \_\_\_\_\_  Post to account number: \_\_\_\_\_

## 4. Request Checks

Indicate information to print on checks.

Account title  Authorized Signer (1)  Authorized Signer (2)  Authorized Signer (3)  Authorized Signer (4)  
 Address  Phone number  Other: \_\_\_\_\_

## 5. Close Deposit Account(s)

Please note:

- All ATM / debit cards assigned to this account will be canceled.
- Any payroll deductions, direct deposits, and / or automatic withdrawals or debits associated with this account will not be canceled. It is your responsibility to cancel such transactions.
- Any items presented after the closure date may not be accepted and may be returned.
- If a CD account is selected for closure or early redemption, early withdrawal penalty may apply and will be deducted from your total withdrawal.

### Indicate deposit account number(s).

ACCOUNT NUMBER(S)	CLOSURE DATE (max. 1 week out)
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### Indicate disbursement of balance.

<input type="checkbox"/> Transfer balance to my BECU account.	ACCOUNT NUMBER
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Issue check payable to \_\_\_\_\_ in person or mail to address below.

STREET ADDRESS		CITY
STATE / PROVINCE	ZIP / POSTAL CODE	COUNTRY

### Indicate reason for closure.

Competitor rates  
 Consolidate BECU accounts  
 Convenience  
 Deceased  
 Fees  
 Fraud  
 Matured CD  
 Relocating / moving  
 Product / service issue  
 Other (please specify): \_\_\_\_\_

## 6. Agreements and Signatures

By signing below, you the person establishing the account and Authorized Signer on the account, acknowledge and agree: (1) You have received, read, understood, and agree to all of the terms and conditions contained in the Boeing Employees' Credit Union Account Agreements, BECU's Privacy Statement, Regulation D Explanation, and BECU's Consumer Account Disclosure, all as amended to date and all of which you will retain for your records; (2) The information you have given in this form is complete, true, and submitted for the purpose of opening a deposit account with BECU now and/or later, or for directing us to take specific actions on an account. You understand that we may rely on this information in our dealings with you now and in the future, and that it is a federal crime to willfully and deliberately provide incomplete or incorrect information to a state chartered credit union insured by the NCUA; (3) BECU may make inquiries necessary to evaluate your applications and to conduct periodic reviews of your BECU accounts, including ordering a credit report, and you instruct BECU to obtain and use such information in determining to notify you about other products and services. You agree that we may tell others about our credit experience with you, and may report information about your accounts to credit bureaus. Late payments, missed payments, or other defaults on your accounts may be reflected in your credit report; (4) All of the credit or other information concerning you that BECU may obtain now or in the future will be compiled, stored, and used in accordance with BECU's Privacy Statement as amended from time to time; (5) By providing your email address, you agree that BECU may send marketing material to you electronically; (6) For non-marketing purposes, BECU and its service providers may contact you about your current or future BECU accounts or applications at any telephone number you provide now or in the future. BECU may use automated telephone dialing, text messaging systems, prerecorded or artificial voice message calls, and electronic mail to contact you. Standard data and message rates may apply and you agree that BECU will not be liable for such fees. You agree to update us promptly when your telephone number changes. At any time, you may update your contact information or revoke your consent to receive non-emergency calls or text messages at a telephone number that has been assigned to a wireless device (or any other service that charges on a per-call basis) by contacting us at 1-800-233-2328, or by texting STOP to the number specified in a text message to cancel. By signing below as the person establishing this account, you certify that you are authorized by court orders, IRS directives or applicable law, to request new accounts, cause requested changes to be implemented, agree to terms of any additional requested products and services with BECU, and to take all other actions and steps reasonable or necessary to do so, and deliver any instruments, or agreements as necessary to BECU. Any action taken by you is ratified and confirmed by any and all with authority to do so. It shall not be necessary for BECU to inquire further into your powers.

**By signing below, you understand that if you choose to have access to Online Banking and Remote Services you will have simultaneous access to your personal accounts and any Blocked Accounts on which you are an Authorized Signer, and BECU shall have no liability for your transactions resulting in commingling of funds. You understand that, Blocked Accounts are not accessible via shared branch, and account owners of such accounts shall have no access to shared branch services for any other accounts that they may own.**

Continued on the next page.

## 6. Agreements and Signatures (continued)

### Taxpayer Identification Number Certification and Backup Withholding Information

By signing below, I certify in accordance with the IRS W-9 instructions and under penalties of perjury that: 1. The number shown on this form is the correct taxpayer identification number for this account (or I am waiting for a number to be issued), and 2. The account owner is not subject to backup withholding because: (a) he, she, or it is exempt from backup withholding, or (b) has not been notified by the Internal Revenue Service (IRS) that he, she, or it is subject to backup withholding as result of a failure to report all interest or dividends, or (c) the IRS has notified the account owner that he, she, or it is no longer subject to backup withholding, and 3. The account owner is a U.S. person (including a U.S. resident alien).

Certification Instructions. Cross out item 2 above if the account owner has been notified by the IRS that he, she or it is currently subject to backup withholding because he, she or it has failed to report all interest and dividends on necessary tax returns. Cross out item 3 and complete a W-8 BEN if the account owner is not a U.S. person.

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

AUTHORIZED SIGNER SIGNATURE (1)	TITLE	DATE
AUTHORIZED SIGNER SIGNATURE (2)	TITLE	DATE
AUTHORIZED SIGNER SIGNATURE (3)	TITLE	DATE
AUTHORIZED SIGNER SIGNATURE (4)	TITLE	DATE

### BECU Use Only

NEW ACCOUNT NUMBER(S)	DATE	REP

### Club / Association Account

- Club accounts require a Taxpayer Identification number (TIN) issued by the IRS, not an individual's Social Security number (SSN).
- Formation documents / bylaws / meeting minutes that designate who is to be on accounts and/or changes being made.
- Registration on [www.pdc.wa.gov](http://www.pdc.wa.gov) database (if applicable).
- Is the club registered with the Washington Secretary of State?  
 No     Yes, provide a Certification Regarding Beneficial Ownership of Legal Entity Members form.

- |  |  |
|--|--|
| <input type="checkbox"/> IDV completed for each Authorized Signer        | <input type="checkbox"/> OFAC completed for each Authorized Signer |
| <input type="checkbox"/> QualiFile@ completed for each Authorized Signer | <input type="checkbox"/> OFAC completed for Club / Association     |

**Return the completed form in person to any BECU location or by mail to:  
BECU Mail Stop 1094-2 PO Box 97050 Seattle, WA 98124-9750 or by fax to 206-805-5612.  
To find a location near you, visit [becu.org/locations](http://becu.org/locations).**