



**Sea West Coast Guard
Federal Credit Union**
P.O. Box 4949
Oakland, CA 94605
(800) SEA-WEST
(800) 732-9378

Member Request For Change Form

Member No: _____
 Savings Sub _____
 Checking Sub _____
 Term Cert. Sub _____

- Change Ownership**
(Add Joint Owner)
- Change Beneficiary**
(Add, Delete or Substitute Beneficiary)
- Add a Savings, Checking, or Term Certificate Product**
(Must have a membership application on file)

Member Information

Last Name: _____ First: _____ Initial _____ Sr. Jr. Title: _____

Social Security No. Birth Date / /

Driver's License No. _____ State _____ Mother's Maiden Name _____

Home Address _____ City _____ State _____ Zip code _____

Home Phone () _____ Work Phone () _____ Email _____

Mailing Address _____ City _____ State _____ Zip code _____

Joint Owner Information: My accounts, except for IRA, are to be joint accounts, unless there is only one authorized signature. Funds in the account at the death of an owner, pass to the surviving owner.

ADD Last Name: _____ First: _____ Initial _____ Sr. Jr. Title: _____

Social Security No. Birth Date / /

Driver's License No. _____ State _____ Mother's Maiden Name _____

Home Address _____ City _____ State _____ Zip code _____

Home Phone () _____ Work Phone () _____ Email _____

Mailing Address _____ City _____ State _____ Zip code _____

Beneficiary Information: Pay on Death Beneficiary:
The following beneficiary(s) is to receive the proceeds of my accounts after the death of all joint owners.

Add Delete Substitute Sub Account _____

Last Name: _____ First: _____ Initial _____ Social Security No.

Home Address _____ Birth Date / /

City: _____ State: _____ Zip code _____ Phone () _____

Add Delete Substitute Sub Account _____

Last Name: _____ First: _____ Initial _____ Social Security No.

Home Address _____ Birth Date / /

City: _____ State: _____ Zip code _____ Phone () _____

I would like more information about:

- Credit Cards (Secured/Unsecured) Mortgages/Home Equity Loans ATM Card Automatic Transfer
- Master Money Card (Debit Card) R.V. / Boat Loans Direct Deposit IRA Accounts (Traditional/Roth)
- Auto Loans Overdraft Protection Other

Terms and Conditions

- Any person who signs this agreement may deposit or withdraw any amount in the accounts. A withdrawal of funds terminates the rights of the other owners to the amount withdrawn. Should any owner die, the other owner will automatically own any money in the accounts, except for Business Accounts and IRA's.
- I understand that your policy and the law permit you to delay the deposit of non-cash items into my account as shown in the Master Account Disclosure and Agreement.
- I authorize you to make internal transfers between accounts, or to disburse funds out of my accounts by Credit Union check made payable to me only, on my telephone request. This is a continuing authorization to open any other account and deposit funds for me on my verbal request.
- Checking account overdrafts will be paid by advances from my Overdraft Protection loan, if I obtain one. Otherwise, they will be taken from savings first.
- I authorize you to check my credit through a national source to verify my previous checking account history and credit standing.

Certification for Taxpayer Identification Number

- I am subject to backup withholding
- I am *not* subject to backup withholding

By signing below, I certify under penalties of perjury that the Taxpayer ID/Social Security number shown on this form is correct (or I am waiting for a number to be issued to me), and that I am not, unless designated above, subject to back-up withholding because: (a) I am exempt from back-up withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to back-up withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to back-up withholding, and I am a U.S. person (including a U.S. resident alien).

I apply for membership and certify under penalties of perjury that the specified membership eligibility information I provided to the Credit Union is true and correct. I acknowledge receipt of the Master Account Disclosure and Agreement.

Member Signature

Date

Joint Owner Signature

Date

Credit Union Use Only

Eligibility

Approved

Membership Officer Signature

Date / /

Account Closed

Date / /