Application for Membership

PECU CREDIT UNION CO-OPERATIVE SOCIETY LIMITED



ACCOUNT NUMBER			IFRS 9			
RISK CATEGORY / RAT	ring	Low	Med	ium	High	
FIRST NAME NATIONAL IDENTIFICAT	TION NO. DRIVER	M.I. 'S PERMIT NO. CITIZENSHIP	LAST N	RT NO.	SINGLE MARRIL	
ADDRESS			M	AILING ADDRE	SS	
STREET			<i>s</i> ₇	REET		
CITY		STATE ZIP C	PODE (CITY		STATE ZIP CODE
COUNTRY				OUNTRY DREIGN BANK	INFORMATION	
DAYTIME PHONE NUMBER	EVENING	PHONE NUMBER				ACCOUNT NUMBER
E-MAIL ADDRESS				NAME OF FOREIG	SN BANK	
EMPLOYMENT CURRENT NAME OF EMPLOYER						
STREET			PH	HONE NUMBER	FAX	NUMBER
CITY	5	STATE ZIP C	PODE E-I	MAIL ADDRESS		
COUNTRY			SALAR	ry .	ОС	CUPATION
PEP INFORMATION						
HEAD OF STATE / SENIOR POLITI		SENIOR GOV'T OR MILITARY SENIOR EXECUT			SENIOR OFFICAL OF	
MANAGEMENT APPR		ENTERPRISE			OF ANY OF THE ABOV	
PRINT NAME				SIGNED		
I ENCLOSE THE SUM	OF					
I hereby apply for mem Laws in force or any of	ENTRANCE F	Credit Union C		DEPOSITS Society Limite		
SIGNATURE OF APPLICAN	T	V	WITNESS			DATE MM/DD/YYYY
COMPLIANCE OFFICE	ER'S VERIFICATION		reign Asset	Control (OFAC	C) LISTED	NOT LISTED
UN 1267/2253 List	LISTED	NOT LISTED		& T Court List	LISTED	NOT LISTED
PRINT NAME			S	IGNED		

	ng of the Board of Directors on		
PRESIDENT pproved by Compliance	SECRETARY	DATE MM/DD/YYYY	
PRINT NAME	SIGNATURE	DATE MM/DD/YYYY	
otes:			