



Your dreams. Our mission.

340 Arden Avenue - Glendale, CA 91203 - 800-433-7328 - 818-937-5329 - www.clearpathfcu.org

Add Checking Form

Account Number _____

Primary Name (First, Middle, Last)

 Social Security # Date of Birth

 Identification # ID Type

 ID Expiration Date ID Issuance Date

 Home Address

 City State Zip Code

 Home Phone Cell Phone

 Work Phone Ext.

 Email Address

Joint #1 Name (First, Middle, Last)

 Social Security # Date of Birth

 Identification # ID Type

 ID Expiration Date ID Issuance Date

Joint #2 Name (First, Middle, Last)

 Social Security # Date of Birth

 ID # ID Type

 ID Expiration Date ID Issuance Date

Acknowledgement of receipt of Disclosures: By signing below, I acknowledge that I have received a copy of Clearpath Federal Credit Union's Account Agreement and Truth-in-Savings Disclosure, Account Overview and Additional Services (Fee Disclosure), Electronic Funds Transfer Disclosure (if applicable) and that I have received a copy of the current Deposit Rates Disclosure.

I agree to be bound by the terms and conditions of the Credit Union's Account Agreement and any amendments thereto. I understand that any new account information will be verified, I authorize the Credit Union to obtain credit reports in connection with current service or product opportunities. I verify all information on this application is true and correct. I authorize Clearpath FCU to open a Checking or Cash Access share on the above referenced account.

I wish to use Courtesy Pay _____ (Please initial)

In addition, I request that Clearpath FCU authorize and pay overdrafts on my ATM and everyday non-recurring debit transactions. _____ (Please Initial)

OR... I do **not** wish to use Courtesy Pay. _____ (Initials)

Your faxed signature on any document you submit to Clearpath Federal Credit Union will have the same legal effect as your original signature.

Primary Signature **Date**

Joint #1 Signature **Date**

Joint #2 Signature **Date**

This section for Credit Union Use Only

Checking Type _____

Primary Qualifier _____

Joint #1 _____ Joint #2 _____

Processed by User # _____

Branch # _____ Initials _____

Approved By _____