

MEMBER SERVICE REQUEST

PLEASE PROVIDE COPIES OF ONE ITEM FROM EACH BOX (NOTE THAT ITEM MAY CONTAIN MORE THAN ONE DOCUMENT.) COPIES CAN BE MADE AT THE STUDENT BRANCH IF NECESSARY.

_____ STUDENT ID AND REPORT CARD OR _____ DRIVERS' LICENSE/PERMIT

AND

_____ BIRTH CERTIFICATE OR _____ SOCIAL SECURITY CARD



STUDENT NAME				
GRADE LEVEL (CIRCLE ONE)	9 th	10 th	11 th	12 th



ADDRESS				
CITY, STATE, ZIP				
CELL PHONE				
EMAIL ADDRESS				



BIRTHDATE				
SOCIAL SECURITY NUMBER				
PRIVACY	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.			



ACCOUNT TYPES & SERVICES (CHECK ALL THAT APPLY)	<p><i>Product offerings are designed to grow with you as you continue your financial education. Account types and services are available by grade level.</i></p> <p>All Students: _____ Student Savings Account/KCU Account</p> <p>10th Grade and up: _____ Checking Account _____ Visa Debit Card</p> <p>11th Grade and up: _____ Credit Builder Loan</p> <p>12th Grade: _____ Line of Credit / Courtesy Pay</p>
	ACCOUNT DESIGNATIONS
BENEFICIARY'S NAME	
ADDRESS	
CITY, STATE, ZIP	
PHONE NUMBER	



PARENTAL PERMISSION	By signing this, I give permission for my child to open their own account at Southern Chautauqua FCU. Please indicate below your preferred method of contact for a courtesy follow up from us.	
PARENT PHONE		Would you like us to text you? <input type="checkbox"/> Yes <input type="checkbox"/> No
PARENT EMAIL		
PARENT SIGNATURE		
DATE		
	By selecting the account types and services and signing this form, you certify that the information on this application is complete and true.	
STUDENT SIGNATURE		
DATE		

***If you would like to be joint on your child's account, please come in to one of our main branches during regular business hours.**