

4. Order New Checks and Cards

Would you like to order new checks and cards for your checking account? (Note: Joint Owner must be on the **primary** savings (Share ID S01) and checking account to receive a card. Visa debit card is available to members age 13 and older with an Alliant savings and checking account.)

YES NO

- Free Visa® debit card for new Joint Owner #1
 - Free Visa® debit card for new Joint Owner #2
 - Free Visa® debit card for new Joint Owner #3
 - I would like checks with my checking account.
(Note: The cost of checks will be deducted from your checking account.)
- Check Style: Duplicate or Single
 Check Starting Number (use 101 or higher): _____

Checks will be printed with the information we have on file for you. In addition, would you like any of the following added to your checks?

YES NO

- Name of new Joint Owner #1
- Name of new Joint Owner #2
- Name of new Joint Owner #3
- Address of Primary Account Owner
- Home phone number of Primary Account Owner
- Drivers license number of Primary Account Owner

Check with Alliant for other check styles, checkbook covers or to obtain check pricing. Prices may vary and are subject to change without notice.

Printed checks and card(s) will be mailed to the primary address on record for the primary account owner. Your new Visa® debit card(s) will be received under separate cover within 14 days. If you do not receive your card, please contact Alliant Credit Union. If you would like to order a Savings ATM card (available to members age 12 and older with Alliant savings only), please complete a Savings ATM card order form available at an Alliant Branch, at alliantcreditunion.com or by logging in to Alliant Online Banking.

FOR OFFICE USE ONLY

1 Processing: Teller ID _____ Branch/Dept. _____ Date _____

2 Verification: Reviewed by Teller ID _____ Date _____

3 ChexSystems: _____ SS# Issuance (Yr.) _____ (State) _____

4 Imaging: Forward to Document & Workflow
(Steps 1 & 2 above must be completed prior to Imaging.)

5. Signatures and Agreements (Required)

I/We the undersigned agree to the terms stated on this form, as an amendment to the account agreement governing the account type and ownership selected. The undersigned also agrees to the terms stated in the separate Account Agreement and Disclosures booklet and Fee Schedule and acknowledges their receipt.

X

 Account Owner Signature (required) Date

If new owners are being added to your account, the owner(s) signature is required below.

X

 New Joint Owner #1 Signature (required if applicable) Date

X

 New Joint Owner #2 Signature (required if applicable) Date

X

 New Joint Owner #3 Signature (required if applicable) Date

Include a photocopy of valid U.S. government- or state-issued photo ID or a Passport with documentation verifying the home address, such as a utility bill or lease agreement, for all new applicants age 18 and older on the account.

MINOR ACCOUNTS: If the account owner or joint owner is/are a child under 12 years of age, the parent or guardian must sign the child's name and his or her own name and date (i.e., "John Smith, a minor, by parent, Mary Smith").

COMPLETE AGREEMENT AND RETURN:

- Mail to:
Alliant Credit Union
Attn: Account Services
PO Box 66945
Chicago, IL 60666-0945
- Fax to: 773-462-2124

FOR MORE INFORMATION:

- Call 800-328-1935 (24/7)
- TDD/TTY 773-462-2300
- (Mon.- Fri., 7am to 7pm CT)



PO Box 66945, 11545 W. Touhy Avenue
 Chicago, IL 60666-0945
alliantcreditunion.com



**Federally insured by
 NCUA**

- Please print clearly in black ink only and initial any changes to this form
- This form is not accepted for IRA, Coverdell Education Savings Accounts (ESA), IRA Certificates and Coverdell ESA Certificates. Please complete the IRA or ESA beneficiary form that can be obtained at alliantcreditunion.com

The owner information supplied herein is intended to add or delete owner(s) to/from your account. The owner(s) of this account agree(s) that all owners on this account are authorized to add/delete owner(s) with the exception of deleting the primary account owner. **Alliant reserves the right to require written consent of all owners for any change to or termination of an account.**

The following account activities are expressly given to the primary account owner:

- Initiate, modify or delete payroll deduction for the primary owner
- Initiate, modify or delete passwords or access codes

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. Therefore, when you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We will also ask to see your driver's license or other identifying documents.

Include a photocopy of valid U.S. government- or state-issued photo ID or a Passport with documentation verifying the home address, such as a utility bill or lease agreement, for all new account owners age 18 and older that are added on the account.

1. Account Owner Information

If the primary account owner is under 18, the parent or guardian must be a Joint Owner on the account.

 First Name Middle Name Last Name

 Member Account Number

2. Add Joint Owner(s) To My Account

ADD NEW JOINT OWNER #1

Beneficiaries cannot be named as Joint Owners on the same Share ID. Owner 1 is being added to my: (Please check all accounts that apply. Share ID is required for each account you are adding the new Joint Owner(s) to.) If you need help determining the Share ID, please refer to your account statement or contact a Member Service Representative at 800-328-1935 (24/7).

ACCOUNT TYPE	SHARE ID
<input type="checkbox"/> Savings	<input type="text"/>
<input type="checkbox"/> Supplemental Savings	<input type="text"/>
<input type="checkbox"/> Certificate	<input type="text"/>
<input type="checkbox"/> Checking	<input type="text"/>

U.S. Citizen or U.S. Person (including a U.S. Resident Alien)
 Yes No

First Name Middle Name Last Name

Is this person also a beneficiary on this account? Yes No
 If yes, this individual cannot also be a Joint Owner on this account type. To remove this person as a beneficiary, please complete a Beneficiary add/delete form.

Social Security Number/ITIN Date of Birth

Street Address (include unit # - PO Box not accepted)

City State/Province Zip Code/Postal Code Country

Home Phone Cell Phone (optional)

Employment Status: Employed Retired Self employed
 Student Unemployed

Occupation-if retired, previous occupation Employer Name-if student, school name

Employer/School City, State and Country

Work Phone (optional)

Email

ID# (e.g., U.S. Driver's License, State ID, or a Passport) Issuing State/Country

Issue Date Expiration Date

Mother's Maiden Name

Beneficiary forms are available at an Alliant Branch, at alliantcreditunion.com or by logging in to Alliant Online Banking.

ADD NEW JOINT OWNER #2

Beneficiaries cannot be named as Joint Owners on the same Share ID. Owner 2 is being added to my: (Please check all accounts that apply. Share ID is required for each account you are adding the new Joint Owner(s) to.) If you need help determining the Share ID, please refer to your account statement or contact a Member Service Representative at 800-328-1935 (24/7).

ACCOUNT TYPE	SHARE ID
<input type="checkbox"/> Savings	<input type="text"/>
<input type="checkbox"/> Supplemental Savings	<input type="text"/>
<input type="checkbox"/> Certificate	<input type="text"/>
<input type="checkbox"/> Checking	<input type="text"/>

U.S. Citizen or U.S. Person (including a U.S. Resident Alien) Yes No

First Name Middle Name Last Name

Is this person also a beneficiary on this account? Yes No
 If yes, this individual cannot also be a Joint Owner on this account type. To remove this person as a beneficiary, please complete a Beneficiary add/delete form.

Social Security Number/ITIN Date of Birth

Street Address (include unit # - PO Box not accepted)

City State/Province Zip Code/Postal Code Country

Home Phone Cell Phone (optional)

Employment Status: Employed Retired Self employed
 Student Unemployed

Occupation-if retired, previous occupation Employer Name-if student, school name

Employer/School City, State and Country

Work Phone (optional)

Email

ID# (e.g., U.S. Driver's License, State ID, or a Passport) Issuing State/Country

Issue Date Expiration Date

Mother's Maiden Name

ADD NEW JOINT OWNER #3

Beneficiaries cannot be named as Joint Owners on the same Share ID. Owner 3 is being added to my: (Please check all accounts that apply. Share ID is required for each account you are adding the new Joint Owner(s) to.) If you need help determining the Share ID, please refer to your account statement or contact a Member Service Representative at 800-328-1935 (24/7).

ACCOUNT TYPE	SHARE ID
<input type="checkbox"/> Savings	<input type="text"/>
<input type="checkbox"/> Supplemental Savings	<input type="text"/>
<input type="checkbox"/> Certificate	<input type="text"/>
<input type="checkbox"/> Checking	<input type="text"/>

ADD NEW JOINT OWNER #3 cont'd

U.S. Citizen or U.S. Person (including a U.S. Resident Alien) Yes No

First Name Middle Name Last Name

Is this person also a beneficiary on this account? Yes No

If yes, this individual cannot also be a Joint Owner on this account type. To remove this person as a beneficiary, please complete a Beneficiary add/delete form.

Social Security Number/ITIN Date of Birth

Street Address (include unit # - PO Box not accepted)

City State/Province Zip Code/Postal Code Country

Home Phone Cell Phone (optional)

Employment Status: Employed Retired Self employed
 Student Unemployed

Occupation-if retired, previous occupation Employer Name-if student, school name

Employer/School City, State and Country

Work Phone (optional)

Email

ID# (e.g., U.S. Driver's License, State ID, or a Passport) Issuing State/Country

Issue Date Expiration Date

Mother's Maiden Name

3. Delete Joint Owner(s) From My Account

(Note: If a Joint Owner(s) is being deleted from an account, all associated plastic cards for electronic access will be cancelled for that owner.)

Delete the following Joint Owners from my: (Please check all accounts that apply. Share ID is required for each account you are deleting the Joint Owner(s) from.) If you need help determining the Share ID, please refer to your account statement or contact a Member Service Representative at 800-328-1935 (24/7).

ACCOUNT TYPE	SHARE ID
<input type="checkbox"/> Savings	<input type="text"/>
<input type="checkbox"/> Supplemental Savings	<input type="text"/>
<input type="checkbox"/> Certificate	<input type="text"/>
<input type="checkbox"/> Checking	<input type="text"/>

First Name Middle Name Last Name

First Name Middle Name Last Name

please be sure to complete section #5