

SHARE ACCOUNT AGREEMENT

Please print and complete this application and bring to any PFCU office or mail to Patriot Federal Credit Union, P.O. Box 778, Chambersburg, PA 17201-0778. If mailing this agreement, all signatures will need to be notarized and a copy of the driver's license for all parties to this agreement will need to be included.

(revised 9/17/03)

Account number _____ Date _____ SD ID _____
Name _____ SSN _____ DOB _____ Lisc. # _____
Name _____ SSN _____ DOB _____ Lisc. # _____
Name _____ SSN _____ DOB _____ Lisc. # _____
Address _____
City, State, ZIP Code _____
Home Phone _____ Work Phone _____
Employer _____
Mother's Maiden Name _____ E-mail address _____
* Your e-mail address will be used by the credit union for general marketing information and e-newsletters.
Reason _____

I hereby make application for membership at Patriot Federal Credit Union, and agree to conform to its bylaws and amendments thereof, copies of which have been made available to me, and to subscribe for at least one (1) share.

I understand that a credit report and/or Coast to Coast Financial Services Inc. report will be pulled. PFCU could restrict products and services, immediately, or at a later date, according to PFCU's account guidelines.

If Life Savings insurance is carried in connection with my account, I agree, in consideration of the credit union carrying such insurance, that my designation or change of beneficiary made by me shall only be binding upon the Credit Union. If I have filed with the credit union prior to my death, such designation or change of beneficiary, in writing, signed by me, on the form supplied by the credit union, and, in the absence of so filling a designation or change of beneficiary, I agree on behalf of myself, my heirs, etc., to indemnify and save harmless the credit union from all loss or damage by reason of the payment of the proceeds of such insurance to such person as the credit union records show to be entitled thereto.

Member's Signature _____ Date _____
I have lived in the following state(s) within the past (5) years _____

JOINT SHARE ACCOUNT AGREEMENT (Not transferable)

The Patriot Federal Credit Union is hereby authorized to recognize any of the signatures subscribed in the payment of funds or the transaction for any business for this account, hereto. The joint owners of this account agree with each other and the Patriot Federal Credit Union that all sums now, or hereafter, paid in on shares by any or all of said joint owners with all accumulations thereon are and shall be owned by them jointly and equally, with the right of survivorship and be subject to the withdrawal or receipt of any of them and payment to any of them, or the survivor or survivors shall be valid and discharge Patriot Federal Credit Union from any liability for such payment. Said joint owners do further agree that any amounts added to this account by reason of any life insurance shall be paid to the surviving joint tenants who are designated as the beneficiary or beneficiaries of such insurance.

Any or all of said joint owners may pledge all or any part of the shares in this account as collateral security to a loan or loans from this credit union.

The right or authority of the credit union under this agreement shall not be changed or terminated by said owners or any of them except by written notice to the credit union that shall not affect transactions theretofore made. Shares are not transferable except on the books of the credit union.

All parties to this account agreement shall keep the credit union informed of change(s) in their address(es).

Member's Signature _____ Date _____
Joint Member's Signature _____ Date _____
State(s) lived in past (5) yrs _____

Joint Member's Signature _____ Date _____

State(s) lived in past (5) yrs _____

*Statutory lien: If you are in default on a financial obligation to Patriot Federal Credit Union, federal law gives PFCU the right to apply the balance of shares and dividends in your account(s) to satisfy that obligation. Once you are in default, PFCU may exercise this right without further notice to you.

Instructions: Cross out item 2 below if the IRS has notified you that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. Cross out item 3 and complete a W-8 BEN if you are not a U.S. person.

CERTIFICATION AS TO TAXPAYER IDENTIFICATION NUMBER AND BACKUP WITHHOLDING

Under penalties of perjury, I certify (1) that the number shown on this form is my correct taxpayer identification number and (2) that I am not subject to backup withholding either because I have not be notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service (IRS) has notified me that I am no longer subject to backup withholding and (3) I am a U.S. person (including U.S. resident alien).

Member's Signature _____ Date _____

CERTIFICATION IF AWAITING NUMBER

Under penalties of perjury, I certify (1) that a taxpayer identification number has not been issued to me, and that I mailed or delivered an application to receive a taxpayer identification number to the appropriate Internal Revenue Service Center of Social Security Administration Office (or I intend to mail or deliver an application in the near future), and (2) that I am not subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service (IRS) has notified me that I am no longer subject to backup withholding.

I understand that if I do not provide a taxpayer identification number to the credit union within 60 days, the credit union will withhold all reportable payments, as required by IRS regulations, until I provide a taxpayer identification number.

Member's Signature _____ Date _____

Eligibility: _____

Verified using: _____ Date _____

Verified by: _____ Date _____

This application is approved by: _____ Date _____

() Board () Executive Committee () Membership Officer