

Take a look at our Savings Options

Share Savings

- Establish membership with a one-time \$10 fee
- Minimum balance \$10
- Quarterly Statements
- Dividends calculated daily, paid monthly
- Access Account by ATM, Trusty Teller or Internet Branch
- Up to six withdrawals allowed per month

Money Market

- Minimum balance of \$2,500
- Quarterly Statements
- 24-hour Trusty Teller and Internet Branch Access
- Minimum withdrawal of \$250
- Up to six withdrawals allowed per month

Kirby Kangaroo

- For children to age 12
- No limit on the number of transactions
- Each child receives a quarterly statement and newsletters

CU Succeed Teens

- For youth age 13 to 18
- No limit on the number of transactions
- Receive quarterly statements and newsletters



Trusted Service - Loan Experts - Since 1951

www.whitecrown.org
PO Box 3060, Denver, CO 80201
303-534-4448 or 800-280-0071

Savings Application & Agreement

Member Acct # _____ ATM Debit Card

Savings Money Market Savings Safari IRA IRA Certificate Share Certificate
Certificate Term: 3 month 6 month 12 month 24 month

Share Certificates

- Competitive interest rates
- 3, 6, 12 and 24 month terms available
- Three tiers of rates (*based on deposit*)
- Minimum balance of \$1,000 no service charge
- Dividends calculated daily, paid monthly
- 24-hour Trusty Teller and Internet Branch Access
- Certificates renewed automatically upon maturity (*unless otherwise specified*)
- Early withdrawals do incur penalties

Individual Retirement Accounts

- Competitive interest rates
- 12 and 24 month IRA certificates available (*with three tiers of rates - based on deposit*)
- Dividends calculated daily, paid monthly
- 24-hour Trusty Teller and Internet Branch Access
- Certificates renewed automatically upon maturity (*unless otherwise specified*)
- Early withdrawals do incur penalties

Member's Name (Last, First, MI)

Social Security # Birthdate Home Phone

Home Street Address City State Zip

Joint Owner Name (Last, First, MI)

Social Security # Birthdate Home Phone

Home Street Address City State Zip

Please transfer \$_____ from my share savings for my initial deposit.

I am enclosing my initial deposit of \$_____

Please set up a monthly periodic transfer of \$_____ from my _____ account to the new account on the

15th of the month 30th of the month both the 15th and 30th

Signature: By signing below, the undersigned agree(s) to the applicable terms and credit union by-laws stated on the front and back of this contract and also agree(s) to the terms and conditions stated on the separate Account Information Disclosure and acknowledge its receipt in relation to any approved accounts. I (we) have been given a copy of the credit union's Privacy Disclosure. By signing below, I (we) certify under penalties of perjury, I (we) certify that: (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and (3) I am a U.S. person (including a U.S. resident alien). Instructions: Cross out item 2 above if you have been notified by the IRS 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. The undersigned certify that the information provided on this application is true and correct and that the terms on this application apply to all listed accounts. I (We) also authorize the credit union to verify and obtain a credit report and other information the credit union may deem necessary concerning my (our) credit standing. If this application is approved and a credit card(s), debit card(s) or ATM card(s) are issued, the undersigned applicant(s) by signing, using or permitting another to use the card(s) agree(s) that the applicant(s) will be bound by the terms and conditions accompanying the card(s) and all amendments. ATM and debit card(s) are subject to an annual fee.

Applicant's Signature

Date

Joint Owner Signature

Date

