

NEW ACCT NO: _____
DATE ENROLLED: _____
BRANCH CODE: _____
INITIALS OF REP: _____

UNIFORM TRANSFER TO MINOR ACCOUNT MEMBERSHIP APPLICATION

PLEASE PRINT

CUSTODIAN

Your Acc No. at RFCU

Last Name, First M.I.

Street Address Apt

City, State, Zip How Many Years/Mos.

Date of Birth Social Security Number

Mother's Maiden Name California ID/DL Number

() _____ - _____ Home Phone

() _____ - _____ Mobile Phone

() _____ - _____ Work Phone

Employer Name

Street Address Your Occupation

City, State, Zip How Many Years/Mos.

RELATIVE WHO WILL ALWAYS KNOW YOUR WHEREABOUTS

Last Name, First M.I.

Street Address Home Phone

City, State, Zip How Are They Related

X _____

Custodian Signature

[] **Copy of Current Calif. DL/Calif. ID Card**

[] **Family Referral**

Family Member Name & Acct. No. Who Referred

X _____

Signature of Referring Member

How Are You Related to the Custodian Member

MINOR

How is the Minor related to the Custodian

Last Name, First M.I.

Street Address Apt

City, State, Zip How Many Years/Mos.

Mother's Maiden Name

Date of Birth Social Security Number

() _____ - _____ Home Phone

RELATIVE WHO WILL ALWAYS KNOW MINOR WHEREABOUTS
SOMEONE OTHER THAN CUSTODIAN

Last Name, First M.I.

Street Address Apt

City, State, Zip How They Are Related

() _____ - _____ Home Phone

(FOR OFFICE USE ONLY)

_____ both cards attached

_____ acct type 47

_____ "CUST" in title

_____ warning code

_____ expiration date comment

_____ accts tied in

_____ ss# override