



MEMBER ELIGIBILITY INFORMATION

SPOKANE FIREFIGHTERS CREDIT UNION

2002 North Atlantic, Spokane, WA 99205
P: (509) 484-5650 F: (509) 487-6567
www.firecu.net

Office Use Only:

Account #

Household#

Member Social Security: _____ Date: _____

Account Type:

- Share / Savings
Sub Shares / Savings
Draft / Checking
IRA
IRA Share Certificate
Share Certificate

Account Ownership Information:

- Individual Account
Joint Account with Right of Survivorship
Other: _____
Updating Account / Reason: _____

Credit Authorization for Draft / Checking:

Name _____ Date _____

Member Name:

First _____ Middle _____ Last _____

Birthdate:

Month _____ Day _____ Year _____

Driver's License:

Number _____ State _____

Address:

City _____ State _____ Zip _____

Phone:

Home _____ Cell _____ Work _____

Mother's Maiden Name:

Phone Code Word:

Email Address:

Employer:

REASON FOR MEMBERSHIP ELIGIBILITY:

Position:

Original Member:

Relationship:

Fire Department:

How did you hear about us?:

Account Services:

- Debit Card > Circle: Opt In / Opt Out
- Payroll Deduction / Direct Deposit
- E-Statements / E-Alerts / E-Notices
- Online Banking / Bill Pay
- Order Checks
- Courtesy Pay
- Over Draft Protection
- See / Jump Accounts Online
- Debit Card Round Up:

Additional Services:

- VISA Credit Card
- Vehicle Loan
- Recreational Vehicle Loan
- Home Mortgage
- Home Equity Line of Credit
- Investment Planning

Joint Account Owner Social Security Number: _____

Employer: _____ **Position:** _____

Member Name: _____ **Phone:** _____
First Middle Last

Birthdate: _____ **Driver's License:** _____
Month Day Year Number State

Address: _____
City State Zip

Email Address: _____ **Mother's Maiden Name:** _____

Credit Authorization for Draft / Checking: _____
Name Date

Joint Account Owner Social Security Number: _____

Employer: _____ **Position:** _____

Member Name: _____ **Phone:** _____
First Middle Last

Birthdate: _____ **Driver's License:** _____
Month Day Year Number State

Address: _____
City State Zip

Email Address: _____ **Mother's Maiden Name:** _____

Credit Authorization for Draft / Checking: _____
Name Date