

ACCOUNT REQUEST FORM - SWITCH KIT



I would like to establish membership!

*Name: _____

*Address: _____
(Last 5 years)

*City/State/Zip: _____

Email: _____

*SSN/TIN: _____ *Driver's Lic. No.: _____

*Date of Birth: _____ *Employer: _____

*Work Phone: _____ *Home Phone: _____

*How are you eligible for membership? _____

I am interested in the following: (check mark all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Savings | <input type="checkbox"/> Freedom Checking |
| <input type="checkbox"/> Share Certificate | <input type="checkbox"/> IRA (Roth / Traditional) |
| <input type="checkbox"/> Loan Application | <input type="checkbox"/> Real Estate Loan Application |
| <input type="checkbox"/> Credit Card Application | <input type="checkbox"/> Bill Pay |
| <input type="checkbox"/> On Line Banking | <input type="checkbox"/> Line of Credit
(may be used as overdraft) |
| <input type="checkbox"/> Escrow Account | <input type="checkbox"/> Visa™ Check Card |
| <input type="checkbox"/> Tap Line | <input type="checkbox"/> Other (Describe below) |

Additional Information: _____

Please bring this form in with you to open your new TAP FCU account, or you can mail or fax it.

“YOUR REAL ESTATE INDUSTRY FEDERAL CREDIT UNION”

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