

Mission for Nonprofits



When you open a Mission Fed Checking Account today, we'll reward you with **\$25** and make a **\$25 donation** directly to the approved nonprofit organization of your choice.

To find out how your local nonprofit can join Mission for Nonprofits, visit MissionFed.com/Nonprofits

Here for All San Diegans. Try Us.

Find out more at MissionFed.com

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MISSION FED
CREDIT UNION

The new member, age 18 or older, must be the primary member opening a Mission Federal Credit Union Checking Account and cannot be a signer on a Mission Fed Account within the last 12 months. The new member must meet the minimum opening deposit required for the Checking Account type by 12/31/2021. The new member must be eligible for membership and all accounts are subject to approval. The new Checking Account must remain open a minimum of 90 days and have a minimum of five (5) eligible member-initiated transactions completed and posted to the account prior to the 91st day of account opening. Upon satisfaction of the above requirements, the \$25 will be automatically deposited to the new member's account and a check will be issued to the nonprofit by the 110th day of the new member's account opening. \$500 minimum balance required to earn .03% Annual Percentage Yield on Smart Checking as of 2/1/2021. Visit MissionFed.com/Nonprofits for Full Rules and a list of eligible transactions. No other promotional offer may be used in conjunction with this special offer. Programs, rates, terms, conditions and services are subject to change without notice. MNG-F2-022021

NEW ACCOUNT APPLICATION

Event: _____

Employee/BD or branch: _____

Thank you for your interest in opening a Youth Savings Account for your child.
Please print and use a blue or black ink pen to complete and sign this application. All fields are required

PRIMARY MEMBER (Complete MINOR'S information here)

Last Name	First Name	Middle Initial
Social Security Number	Date of Birth	Mother's Maiden Name
Physical Street Address (No P.O. Box)	Apartment/Unit Number	City, State, Zip

Minors must provide either a Birth Certificate, Social Security Card, School ID or Government ID for identification.
Ages 16 & 17 with valid government-issued ID do not require a parent/legal guardian signer.

JOINT MEMBER (Complete PARENT/GUARDIAN'S information here)

Last Name	First Name	Middle Initial
Social Security Number	Date of Birth	Mother's Maiden Name
Physical Street Address (No P.O. box)	Apartment/Unit Number	City, State, Zip
Mailing Address (Statements will be mailed here)	Apartment/Unit Number	City, State, Zip
Home Phone Number	Cell Phone	Email Address
Employer	Occupation	Work Phone

Primary Identification (Gov. Issued): ID Type/Number, Issue Date, Expiration Date
Gov. Issued: Driver License, State ID, Passport, etc.

Secondary Identification (Gov. or Non-Gov. Issued): ID Type/Number, Issue Date, Expiration Date
Non-Gov. Issued: Work ID, Debit/Credit card, Insurance card, Costco card, etc.

Certification of Taxpayer Identification Number (W-9):

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number and,
2. I am not subject to backup withholding due to a failure to report interest and dividend income, **and**
3. I am a U.S. person (including a U.S. resident alien).

Certification Instructions: You must cross out item 2 above if you have been notified by the IRS you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask your name, street address, date of birth, tax identification number, and other information that will identify you. We may ask to see your driver license and/or identifying documents.

By signing below, you are applying for credit union membership. You authorize the use of consumer reports from third parties, including but not limited to, credit checks, depository history information and verification of employment. You acknowledge receipt of and agree to be bound by the terms and conditions of Mission Fed's Account Agreements and Disclosures, Truth-in-Savings Act Disclosure, Privacy Policy, Dividend and Consumer Fee Schedule, and all Agreements and Disclosures applicable to Credit Union products and services you utilize, plus all amendments to any disclosures, terms and agreements. Your signature also certifies that you have read and verified the Certification of Taxpayer Identification Number (W-9) above.

Signature of Primary Member (Minor's Signature) _____ Date _____

Signature of Joint Member (Parent/Guardian's Signature) _____ Date _____

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For Mission Fed Use Only: MISSION FED ACCOUNT #: _____ Date Opened: _____
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