

## **Application for a Custodial Account**

**East Baltimore Branch** 2027 E. Monument St. Baltimore, MD 21205

**Homewood Branch** 4 E. 33<sup>rd</sup> Street Baltimore, MD 21218 **Bayview Branch** 5201 Alpha Commons Dr. Baltimore, MD 21224

\* Applications must include a photocopy of the custodian's valid government-issued ID that contains the individual's signature, such as a Driver's License, state-issued ID, or Passport.

☐ New Account	nt Changes/Additions to Current Account							Credit Union Use Only Account Number:				
Minor Information A	Are You a U.S. Ci	itizen?	Yes 🗆 No I	If no, are Y	ou a perman	ent resid	ent?	Yes 🗆 N	No			
First	M.I.	L	ast		Suffix	Social S	ecurity Nu	ımber	Birthdate	Mothe	er's Maiden Name	
Home Address (all mail will be	sent to the custodian	s's mailing ad	dress)		City				State		Zip	
N 4 30 4 4 4 6	4											
Custodian 1 Informa	ation Are You a	U.S. Citize	en? ∐ Yes ∐	No If n	o, are You a	permane Last	nt reside	nt? L Ye	es 🏻 No	Suffi	X	
Home Address					City	City			State		Zip	
Mailing Address (if different than home address)					City	City			State	State		
Social Security Number	State/Government	t-Issued ID T	ype and ID Number	r	Issue Date		Expira	tion Date	Birthdate	Mothe	r's Maiden Name	
Primary Telephone	Cell Telephone W		Work Telephon	ie	Extension			E-Mail Address				
Employer				Occupation	n							
Custodian 2 Informa	ation Are You a	a U.S. Citiz	zen? ☐ Yes ☐	No If r	no, are You a	permane	ent reside	ent? 🗆 Y	es □ No			
First					M.I.	Last				Suffi	х	
Home Address	ome Address					City			State		Zip	
Mailing Address (if different than home address)					City	City			State		Zin	
Maning Address (if different di	ian nome address)				City				State		Zip	
Social Security Number	State/Government	t-Issued ID T	ype and ID Number	r	Issue Date		Expira	tion Date	Birthdate	Mothe	r's Maiden Name	
Primary Telephone	Cell Telephone		Work Telephon	ie	Extension			E-Mail Addr	ress			
Employer				Occupation	n							
C-4-1	TC 42											
uccessor Custodian Name	iniormation	1				Bir	thdate		Social Security	Number		
rimary Member First		M.I.	Last						Social Security	Number (la	st 4 digits)	
										(	,	
Relationship to Minor												
pplication												
				1				1 M	1 4 I I : f T		Minana Aat	
Minor's Name				born _	Minor's Date of	of Birth	unaer t	ne Mary	land Uniform Tra	insiers to	Minors Act.	
You hereby apply for a sh	are account in the	Johns Hop	kins Federal Cro	edit Union,	to be issued	under the	e Provisio	ons of the N	Maryland Uniform Tra	insfers to I	Minors Act and subject	
to the Credit Union's Char all agreements and disclos												
specimen of Your signatur												
By completing this application of the street by the street in the street by the street				have) all se	ervices below	which ha	ive been	designated	l with an "X" in the b	oxes (all m	embers automaticall	
_	ller Machine (A)		*				Educat	tion Savin	gs (3yr.)			
☐ Automated Teller Machine (ATM) Card (Custodian 2)								Education Savings (5yr.)				
☐ Money Market Acct.							Custor	Custom Savings, Name:				
☐ Share (Savings) Account						$\boxtimes$	TeleBranch 24/Online Banking (free telephone and PC access)					
All of the above account	t/services shall b	e registere	ed according to	the inform	nation above	e.						
THE INTERNAL REVEN REQUIRED TO AVOID B.			REQUIRE YOU	UR CONSE	ENT TO ANY	PROV	SION O	F THIS D	OCUMENT OTHER	THAN TH	E CERTIFICATION	
Custodian 1 Signature			-	Date	· <del></del>	Custo	dian 2 S	ionature	-		Date	

## **Substitute W-9 - Certification**

Under penalties of perjury, You, as custodian for the minor named herein, certify that:

- 1. The minor's Social Security number shown at the top of this form is the minor's correct taxpayer identification number; and
- 2. The minor is not subject to backup withholding because: (a) the minor is exempt from backup withholding; or (b) the minor has not been notified by the Internal Revenue Service that the minor is subject to backup withholding as a result of a failure to report all interest or dividends; or (c) the IRS has notified the minor that the minor is no longer subject to backup withholding.

## IMPORTANT INFORMATION ABOUT PROCEDURE(S) 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 You for Your name, address, date of birth, and other information that will allow Us to identify You. We may also ask to see Your driver's license or other identifying documents.

may also ask to see 1 our driver's ficense or other identity										
For credit union use only:										
Qualified (Minor)	Qualified (Custodian 1)	Qualified (Custodian 2)								
Agreements and Disclosures, Rate Supplement and Schedule of Fees and Charges given personally:  Employee's Initials  Date										
Agreements and Disclosures, Rate Supplement and Schedule of Fees and Charges given by mail/electronically:    Employee's Initials Date										
Address Verification for Custodian 1										
□ ID □ MVA Change of Address □ Other □ See Comments										