

# THANK YOU

Thank you for your interest in becoming a member of Coca-Cola Credit Union! We will proceed with your request once we receive the following documents:

- Completed Membership Application (Below)
- Copies of Two Forms of Identification
  - Coca-Cola Company Employee Badge **AND** Government Issued ID (Driver's License, Passport etc.)
  - If you are not a Coca-Cola employee you will need a completed Membership Affidavit from your sponsor in order to become eligible for membership.

If you are adding a joint owner on the account, please ensure the following:

- Joint Owner signs Membership Application
- Copies of Two Forms of Identification for Joint Owner
  - Driver's License or State ID or Passport **AND** Social Security Card, or Birth Certificate

Please note:

- Use the "Debit Authorization" section to have the **required** \$10 minimum deposit transferred from an outside institution
- Debit Cards are NOT available for savings accounts only, you must select a savings (required for membership) **AND** a checking account to request a debit card

Please forward these items via fax to 404-598-2586 or via email at [creditunion@coca-cola.com](mailto:creditunion@coca-cola.com).

Please note, identification received via fax is often very distorted and unclear. If this becomes the case, we will request that you resubmit your copies via other method. Our recommendation is that you forward identification to us via a picture from a smart phone device.

*Please allow 2-3 business days for processing once all materials are received.*

Please feel free to contact us if you have any questions or concerns at 404-676-2586 inside metro Atlanta, or toll free at 877-277-2586 outside the metro Atlanta area. We look forward to establishing your membership and providing you with our world-class Refreshing Financial Solutions!

# Membership Account Application



Member Information				
Last Name	First Name			Middle Initial
Street Address	City	State	Zip	
Date of Birth	Mother's Maiden Name (Security Code)		Email Address	
Driver's License Number / State	Home Phone Number	Business Phone Number	Country	Country Code
Eligibility For Membership				
Currently Employed By	Division/Dept	Family Member or Sponsor Name	Sponsors Phone Number	
Taxpayer's Identification Number Or Social Security Number			New Member Number	
Part I. Enter your (Payee) Taxpayer Identification Number (TIN) or Social Security Number				

**Part II. Under penalties of perjury, I certify that: 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and 3. I am a U.S. citizen or other U.S. person. I understand that if I am not a U.S. citizen or other U.S. person, I must submit the appropriate IRS Form W-8 with the membership application.**

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid back up with holding.

This account shall be:  Individual  Joint  With Payable-On-Death (POD) Provision

Joint Owner Information				
Last Name	First Name		Middle Initial	Date of Birth
Street Address (if different from address listed above)	City	State	Zip	
Social Security Number	Driver's License Number / State		Mother's Maiden Name (Security Code)	
Email Address	Home Phone Number	Business Phone Number	Country	Country Code

Account Authorization Type	Separate application required for the following
<input type="checkbox"/> Savings Account* <input type="checkbox"/> Classic Money Market Account* <input type="checkbox"/> Share Certificate <input type="checkbox"/> Premier Account <input type="checkbox"/> Checking Account <input type="checkbox"/> Club Savings Account* <input type="checkbox"/> Alumni Account	<input type="checkbox"/> IRA <input type="checkbox"/> Revocable/Irrevocable Trust

### Automatic Overdraft Protection

I authorize you to automatically pay any overdraft(s) on my checking account(s) from my account(s) listed below:

Savings\*   
  Premier Savings\*   
  Checking Line of Credit  
(requires separate application)

No more than six (6) pre-authorized automatic or telephone transfers allowed from any savings per month. See Rate and Fee Schedule for details.

Debit Authorization	
I authorize Coca-Cola Federal Credit Union to initiate a charge (debit) entry at the Financial Institution indicated below, and initiate adjustments (if necessary) for any transactions debited in error. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.	
I _____, authorize	
Financial Institution Name	9 Digit Routing Number
Account Number	Amount (One-time only, \$1,000.00 limit) \$

Please turn over to complete application; signature is REQUIRED.

**Designation On Payable-On-Death Beneficiary**

All account types under this member number       Specific account type(s)

(NOT for use with HSA, IRA or Share Certificates. Use separate specially designated forms.)  
Cannot be the same person as joint owner.

**Beneficiary Information**

Name	Social Security #	Date of Birth	% of Distribution
Street Address (P.O. Box not permitted)	City	State	Zip
Name	Social Security #	Date of Birth	% of Distribution
Street Address (P.O. Box not permitted)	City	State	Zip
Name	Social Security #	Date of Birth	% of Distribution
Street Address (P.O. Box not permitted)	City	State	Zip

Notice: All beneficiaries are subject to an OFAC review before being added or prior to disbursal of funds. A Payable-On-Death Beneficiary on a joint account will not have access to account funds unless all owners are deceased. Once signed and dated, this form will supersede any previously dated form on file.

**TOTAL DISTRIBUTION**  
(Total should add up to 100%)

**Visa Debit Card**

**Acknowledgement:** Further, by signing this form, I (we) acknowledge receipt of the Electronic Funds Transfer Act (Regulation E)      **Check Appropriate Box:**     Primary     Joint

**E-Consent Communications Agreement**

**CONSENT FOR ELECTRONIC COMMUNICATION**  
By signing you affirmatively agree and authorize the Credit Union to conduct business with you electronically. This disclosure documents your consent to conduct transactions electronically and to electronically receive disclosures and notices relative to the accounts you are applying to open with us online and other products and services we may offer. The disclosure also describes your rights relative to conducting transactions electronically and to electronically receiving disclosures and notices, as well as the consequences of withdrawing your consent. We recommend you print and retain a copy of this disclosure and all the disclosures and agreements related to this transaction.

- The information may include, but is not limited to:
- Account Alerts
  - Annual Privacy Notice with opt-out option
  - Billing Rights
  - Disclosures
  - E-Documents (E-Statements, E-Notices, and E-Receipts)
  - Electronic Funds Transfer Disclosure
  - Funds Availability Policy
  - Notice of change in terms for your deposit account
  - Notice of change in schedule of fees
  - Terms and Conditions of your deposit account
  - Truth-In-Savings

Please see Membership Agreement Booklet for full E-Consent Communications Agreement.

**Account Agreement**

I am applying for membership in Coca-Cola Federal Credit Union. Each applicant for membership certifies that they are eligible for membership in Coca-Cola Federal Credit Union's field of membership. All of the information on the application is accurate and true and the account is subject to closure if false information is provided.

I agree to abide by the bylaws as well as all applicable terms and conditions set forth in the Membership & Account Agreement and the Rate and Fee Schedule, all of which receipt is here by acknowledged and which are incorporated by this reference.

I authorize you to verify and gather whatever credit, checking account, and employment information you consider appropriate from time to time. I understand this will assist you, for example, in determining my initial and ongoing eligibility for my Accounts and/or in connection with making future credit opportunities available to me.

This application serves as the Master Membership Account Application or Supplemental Application, and controls all subaccounts opened under this member number, except Individual Retirement Accounts (IRAs) and Trust Accounts, and is a continuing authorization to open any other account for me on my verbal request and deposit of funds.

NOTE: Included is my initial U.S. Dollar deposit into my Savings Account in the amount of \$ \_\_\_\_\_ (\$10.00 minimum opening deposit requirement must be maintained at all times in your Savings Account).

You may return this form using any of the following methods:  
Mail: Coca-Cola Credit Union, PO Box 1734, Atlanta, GA 30301-1734  
Fax: 404-598-2586  
Email: creditunion@coca-cola.com

New Member's Signature	Date

Joint Owner's Signature	Date

# For New Members of Coca-Cola Credit Union

## Enroll in Online Banking

Access your account information anytime through Online Banking! You can check your account balances, transfer funds, download statements, make loan payments and much more.

Follow these steps to enroll in Online Banking:

- Go to [creditunion.coca-cola.com](http://creditunion.coca-cola.com)
- Click on "Enroll Now"
- Enter your Account Number (or Member Number\*)
- Enter your Social Security Number\*\*
- Enter your Date of Birth
- Create a Username (*at least 3 characters and contain at least 1 letter*)
- Create a Password (*at least 4 characters and include an uppercase and lowercase character, and at least 1 number*)
- Agree to the Terms and Conditions

\* Member numbers are available on your statement

\*\* If you do not have a SSN, please contact the credit union.

*NOTE: Payments to a foreign address are not available at this time.*

## Mobile Banking App

**Download** the Coca-Cola CU Mobile Banking App for your most robust mobile banking experience! With our newly enhanced Mobile App, managing your credit union accounts is easier than ever. You can use your mobile device to:

- Check account balances
- Pay loans or bills
- Deposit checks
- Make transfers between accounts
- Pay other people
- Find shared branches or ATMs

\* Based upon wireless network availability. *"Message and data rates may apply."*

## Phone Banking

To access your account anytime by phone, enroll in Phone Banking. To enroll, contact Member Services to request a phone banking PIN.

## Direct Deposit and ACH Payments

To set up direct deposit and ACH payments, simply use your valid account and routing information from your membership card.

## What to Expect

If you ordered a Visa® Debit Card, it will arrive in approximately 7-10 business days. After receiving your card, you will select your own PIN when you call to activate your card.

Federally insured by NCUA.

Rev 10/04/2017

