

## JOINT OWNER CHANGE

MEMBER NUMBER \_\_\_\_\_

I/We authorize The Florist Federal Credit Union to make and accept the following changes to my/our accounts:

**JOINT OWNER(S) INFORMATION**     ADD     CHANGE     REMOVE

### NEW JOINT OWNER INFORMATION — WILL BE ADDED TO ACCOUNT

New Joint Name				Social Security/ Tax ID Number	
Home Phone	Work Phone	Cell Phone	DOB	Mothers Maiden Name	
Street Address (Required)		City	State	Zip	
Mailing Address – If Different From Above		City	State	Zip	
Government Issued ID #			Exp. Date	State Of Issue	
Email Address					

### CURRENT JOINT OWNER—WILL BE REMOVED FROM ACCOUNT

If required by The Florist Federal Credit Union, removal of a Joint Account owner requires consent of all owners, and we will hold The Florist Federal Credit Union harmless for actions regarding account access. The removed joint account owner(s) relinquishes ownership interest including any membership share in the account(s) set forth on the next page. This relinquishment does not affect my/our obligation on any loan accounts.

Joint Member Name				Social Security/ Tax ID Number	
Home Phone	Work Phone	Cell Phone	DOB	Mothers Maiden Name	
Street Address		City	State	Zip	
Mailing Address—If Different From Above		City	State	Zip	
Government Issued ID #			Exp. Date	State Of Issue	
Email Address					

### Authorization:

I/We agree that the changes on this Card amend the previously signed Account Card and are subject to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Disclosure, and Funds Availability Policy Disclosure, if applicable, and to any amendment The Florist Federal Credit Union makes from time to time which are incorporated herein. I/We acknowledge receipt of a copy of the Agreements and Disclosures applicable to the accounts and services requested above. If an access card or EFT service is requested and provided, I/We agree to the terms of and acknowledge receipt of the Electronic Funds Transfer Agreement.

### SIGNATURES    \*\*ALL SIGNERS ON THE ACCOUNT MUST PROVIDE A COPY OF THEIR GOVERNMENT ISSUED ID.\*\*

PRIMARY ACCOUNT HOLDER— <u>PRINT</u>	PRIMARY ACCOUNT HOLDER— <u>SIGN</u>	DATE
JOINT ACCOUNT HOLDER— <u>PRINT</u>	JOINT ACCOUNT HOLDER— <u>SIGN</u>	DATE