

ONLINE MEMBERSHIP DISCLOSURES

Important information about the procedures for opening a new account: To help the United States government fight the funding of terrorism and money laundering activities under the USA PATRIOT Act, federal law requires all financial institutions to obtain, verify, record and retain the information that identifies each person who opens a new or additional account. What this means for you: When you open a new Membership, share account and/or loan; we will require your legal name, tax identification number, residential and mailing addresses, date of birth, and any other information that will allow us to identify you. We will also require a photocopy of your identification and other identifying documents. These requirements must also be met by any joint owner(s) on your account(s).

By signing and submitting this application, I am applying for Membership in the iTHINK Financial Credit Union and for any additional accounts and services as indicated. As a condition of admission to Membership, I must complete payment of one (1) \$5.00 share in my Membership account. If the balance in my Membership account falls below what is required for Membership, I may be terminated from Membership immediately, and/or forfeit any and all Membership rights and privileges.

Under penalty of perjury, I certify that all information provided in this application is true and correct, including the United States (U. S.) Internal Revenue Service (IRS) Taxpayer Identification Number entered as my Social Security Number. I understand and agree that I will not be eligible for Online Credit Union Membership if I am not a U. S. Citizen or Permanent Resident, or if I do not live or work in the U. S. I agree to provide a signed and completed Membership Application, an opening deposit by Automated Clearinghouse (ACH) or credit card for at least the minimum balances of the accounts that I have selected, a legible copy of my unexpired U. S. government issued photo identification, a password that will be used to verify my identify when I contact the Credit Union via telephone, and any other documents or additional information as required by the Credit Union now or in the future.

I authorize the Credit Union to obtain my credit and debit bureau reports and any additional information from other sources for the purposes of evaluating this application, to obtain subsequent reports on an ongoing basis in connection with this transaction, and for all other legitimate purposes, such as reviewing my accounts or taking collection action against my accounts. I agree to abide by the Bylaws and other rules of the Credit Union, promise to pay all balances due, and agree not to cause any loss to the Credit Union. I confirm my ability to access and retain electronic documents, and consent to receive electronic disclosures, statements, tax forms and other communications at the email address that I have provided, and agree to receive certain written documents by mail at the Credit Union's discretion. I understand that I may opt out of receiving electronic communications at any time by notifying the Credit Union of my communication preference, and I agree that I may be assessed a fee to receive Credit Union documents on paper by U. S. mail. I agree to promptly notify the Credit Union of any changes to my contact information; including my email address, residential and mailing address, and telephone numbers.

I acknowledge receipt of, and agree to the terms and conditions of the disclosures, fees schedules and agreements listed below, and to any amendments made thereto. This agreement, and all subsequent amendments and addendums, will be governed by applicable Federal law and the laws of the State of Florida, and the regulations and requirements imposed by the National Credit Union Administration (NCUA). I agree that all present and future deposits into my accounts will secure any and all obligations that I owe the Credit Union, including all fees, charges and reasonable attorney fees, as well as all loans and credit cards that I may have with the Credit Union. Any monies owed to the Credit Union prior to my death will continue to encumber my shares, deposits and collateral, in case of default after my death. The Credit Union may report information about my account to credit bureaus and financial reporting agencies, regarding negative balances, Non-Sufficient Funds (NSF) transactions, loan delinquencies, or other defaults and activities on my account that may be reflected in my credit report and financial records.

The electronic signature on this Online Membership application allows the Credit Union to use a facsimile signature on this and future applications, and authorizes the issuance of the Passwords necessary to access the Online Banking system, which will also be considered my authorized signature to process certain transactions and account maintenance.

Your Membership also includes the issuance of a debit card and standard Overdraft Protection that automatically transfers funds from your Membership savings to your checking, in case there are insufficient funds to pay ACH, checks or other items; fees may apply. Contact us if you do not want to take advantage of this service, or to set up an alternate overdraft source. If you qualify, we may pay ACH, bill pay and check items from your checking account for a fee through the Overdraft Privilege (ODP) program against your available balance, even though it may result in a negative balance.

By providing the telephone number for a landline or wireless cellular mobile telephone, you consent to receive calls, including autodialed and prerecorded messages, from iTHINK Financial Credit Union or its non-affiliated third-party providers, such as its fraud prevention monitoring vendor. By providing an email address, you also consent to receive emails from iTHINK Financial Credit Union and its non-affiliated third-party providers regarding products and services.

For future reference, please review and retain the important information included in the documents listed below regarding the fees, penalties, terms and conditions for your iTHINK Financial Credit Union accounts and services, which can be found on the “*iTHINK Financial Credit Union – About – Disclosures*” section of our website at ithinkfi.org. For assistance, please contact the Credit Union by telephone at 800.873.5100; by email to onlinemembership@ithinkfi.org; by fax to 561.226.5415; or by mail to iTHINK Financial Credit Union, P. O. Box 5090, Boca Raton, FL 33431-0890.

- [iTHINK Financial Credit Union Electronic Communication and Electronic Signature Agreement](#)
- [iTHINK Financial Credit Union Membership Disclosure](#)
- [iTHINK Financial Credit Union Share Account Rates](#)
- [iTHINK Financial Credit Union Membership Fee Schedule](#)
- [iTHINK Financial Credit Union eAlert/eStatement User Agreement](#)
- [iTHINK Financial Credit Union Privacy Disclosure](#)
- [NCUA Share Insurance Brochure](#)