

**WAWA EMPLOYEES' CREDIT UNION**  
**260 W. Baltimore Pike, Wawa, PA 19063-5699**  
**610-358-8030 Fax 610-358-8289**  
**MEMBERSHIP APPLICATION**

Name (Please Print) Last First Middle Initial

Street

City State Zip

Social Security Number Date of Birth

( ) ( )  
 Home Phone Work Phone

Email

Eligibility for Membership or Store #

I hereby make application for membership in Wawa Employees' Credit Union and agree to conform to the bylaws or any amendments thereof in the Wawa Employees' Credit Union. I understand that by my signature on this application, I and any joint owners acknowledge that I have received all applicable disclosures and that I agree to all the terms and conditions as set forth.

Under penalties of perjury I certify that (1) the number shown on this form is my correct Taxpayer Identification (Social Security) Number and (2) that I am not subject to backup withholding as a result of a failure to report all interest or dividends; or the Internal Revenue Service has notified me that I am no longer subject to backup withholding. (3) I am a U.S. person (including a U.S. resident alien).

**X** \_\_\_\_\_  
 Your Signature Date

**Joint Account Information Only**

Name (Please Print) Last First Middle Initial

Social Security Number Date of Birth

**X** \_\_\_\_\_  
 Joint Members Signature Date  
 (Over) Updated 6/2014

**Account Services**

Check the services you would like to receive.

Savings (\$5.00 Minimum Required)

STAR/ATM (Service Fee Charged)

PIN \_\_\_\_\_  
 (4 Numbers or 4 Characters no Q or Z)

No fee Checking

Order checks (Cost is deducted from acct)

Master Card Check Card with

STAR/ATM (Service Fee Charged)

PIN \_\_\_\_\_  
 (4 Numbers or 4 Characters no Q or Z)

Christmas Club

Vacation Club

**Wawa Payroll Deduction**

If you wish your payroll deduction to go into more than one account, fill in the amount on each account and write REMAINDER or NET in the account to receive the balance.

\$ \_\_\_\_\_ Savings

\$ \_\_\_\_\_ Checking

\$ \_\_\_\_\_ Christmas Club

\$ \_\_\_\_\_ Vacation Club

\$ \_\_\_\_\_ Total or  Net Pay

**Official Use Only**

Cks System \_\_\_\_\_ Denial Mailed \_\_\_\_\_

Cks Date \_\_\_\_\_ By \_\_\_\_\_

Disclosure Date \_\_\_\_\_ By \_\_\_\_\_

ATM Date \_\_\_\_\_ By \_\_\_\_\_

Payroll Start \_\_\_\_\_

Verify Docs \_\_\_\_\_