



7905 Malcolm Road - Suite 311
Clinton, MD 20735
(800) USPS-FCU (877-7328) Fax: (301) 856-4061

Savings Account Application

ACCOUNT NUMBER: _____

This form must be completed and signed. No verbal requests can be accepted.

APPLICANT INFORMATION

LAST NAME		FIRST NAME	MI
ADDRESS			
CITY	STATE	ZIP	
EMAIL ADDRESS	HOME PHONE	DAY PHONE	

☐ **Money Market Savings Account (MMSA) (minimum \$5,000)**

Amount: \$ _____

☐ **Monthly Income Share Certificate Account (MISCA) 24-Months Term**

(minimum \$10,000) Amount: \$ _____

☐ **Share Certificate Account (minimum \$250) with a term of:**

☐ 12-Months Amount: _____

☐ 24-Months Amount: _____

☐ 36-Month Amount: _____

☐ 60-Months Amount: _____

☐ **Money Market Certificate Account (MMCA) 6-Months Term**

(minimum \$5,000) Amount: \$ _____

☐ **Club Accounts**

Amount: \$ _____

☐ Vacation Savings

☐ Tax Savings

☐ Christmas Savings

☐ Special Purpose Savings

☐ **Starter Share Certificate (minimum \$1)**

12-Month (\$1,000 max) Amount: \$ _____

☐ **Young Savers Certificate (minimum \$1) with a term of:**

☐ 12-Month (\$1,000 max.) Amount: \$ _____

☐ 36-Month (\$3,000 max.) Amount: \$ _____

TOTAL: \$ _____ Fund

account(s) by transferring from:

☐ Primary Savings ☐ Checking ☐ Other _____

Dividends will be credited into the certificate unless specifically requested in writing.

PRIMARY APPLICANT'S SIGNATURE

DATE

JOINT APPLICANT'S SIGNATURE

DATE

For Credit Union Use Only

Received by: _____ (Initials & Teller #)

Date Received: _____

Date Opened: _____

Mail (with check) to:

**U.S. Postal Service Federal Credit Union
7905 Malcolm Road, Suite 311
Clinton, MD 20735-1730**

Or Bring to a Credit Union Branch Near You!

You may also fax this application to 301-856-4061