

Arkansas AM&N College Federal Credit Union

1200 North University Drive
Mail Slot 4963
Pine Bluff, Arkansas 71601
870-534-1990
Fax: 870-534-5878

Application for Membership

Owner/Member: _____ SSN/Tax ID: _____

Driver's License No.: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____ Work: _____

E-mail Address: _____

Employer: _____ Years of Employment _____

Department: _____ Fulltime _____ Part-Time _____ Extra-Help _____

Department Phone Ext. _____

Joint/Owner Information

Name: _____ Date of Birth _____ Phone Number _____

Social Security No: _____ Address _____

Membership Eligibility:

UAPB/AM&N Alumni: National _____ Local _____

Family Member's Name: _____ Relationship: _____

Check Account Type to open:

Shares Savings _____

Loan _____

Christmas Savings _____

Share Certificate (CD) _____

Social Security Verification:

ARE YOU SUBJECT TO BACKUP WITHHOLDING? YES _____ NO _____

Designation of Beneficiary:

Beneficiary Name: _____

Street: _____ City/State/Zip _____

Signature _____ Date _____