

# SAVING FOR YOUR FUTURE IS EASY WITH...

## SCHOOL BANKING!

**EVERY WEDNESDAY FROM 7:50 A.M. TO 8:20 A.M.**

### BAIRD LOBBY

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#### L-U-S-O STATEMENT SHARE ACCOUNT AGREEMENT PAUL R. BAIRD MIDDLE SCHOOL

Please complete this agreement and have your student bring it to the school banking table on any school banking day.  
You may also open the account at either of our branch locations!

#### STUDENT INFORMATION

Member (1) Name: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_, State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
School Name: Baird Middle School  
Grade Level: o 6<sup>th</sup> o 7<sup>th</sup> o 8<sup>th</sup>  
Parent or Guardian Signature: \_\_\_\_\_

#### JOINT ACCOUNT HOLDER

Signer (2) Name: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_, State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
License Number: \_\_\_\_\_ Expiration Date: \_\_\_/\_\_\_/\_\_\_  
License Issue State: \_\_\_\_\_ Issue Date: \_\_\_/\_\_\_/\_\_\_  
Telephone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Employer: \_\_\_\_\_  
Business Tel: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Signature of Joint Applicant: \_\_\_\_\_

This is a variable rate account and rates are subject to change. **Member share deposit of \$5 compliments of LUSO!**  
Please visit our website, [www.lusofederal.com](http://www.lusofederal.com), to review current rates.



If you have any questions regarding the school banking program, please contact Celia Fernandes at [cfernandes@lusofederal.com](mailto:cfernandes@lusofederal.com) or 589-9966 ext. 105.