

**SAVING FOR YOUR FUTURE IS EASY WITH...
SCHOOL BANKING!**

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

BAIRD LOBBY

**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: _____
Mother's Maiden Name: _____
Social Security Number: _____ Date of Birth: ___/___/___
Street Address: _____
City: _____, State: _____ Zip Code: _____
Telephone Number: (____) _____-_____
School Name: Baird Middle School
Grade Level: o 6th o 7th o 8th
Parent or Guardian Signature: _____

JOINT ACCOUNT HOLDER

Signer (2) Name: _____
Mother's Maiden 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, to review current rates.



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