



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

STATEMENT SHARE ACCOUNT AGREEMENT

School Name: _____

Please complete this agreement and have your student bring it to any LUSO Federal Credit Union branch.

STUDENT INFORMATION

Member(1)Name: _____

Mother's Maiden Name: _____

Social Security Number: _____ Date of Birth: ____/____/____

Street Address: _____

City: _____, State: _____ Zip Code: _____

TelephoneNumber: (____) _____ - _____ GradeLevel: _____

Parent or Guardian Signature: _____ Date: _____

JOINT ACCOUNT HOLDER

Signer(2) Name: _____

Mother's Maiden Name: _____

Email Address: _____

Social Security Number: _____ Date of Birth: ____/____/____

Street Address: _____

City: _____, State: _____ Zip Code: _____

License Number: _____ Expiration Date: ____/____/____

License Issue State: _____ Issue Date: ____/____/____

Telephone Number: (____) _____ - _____ Employer: _____

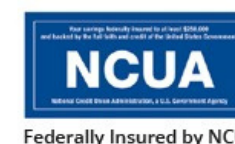
_____ Business Tel: (____) _____ - _____

Signature of Joint Applicant: _____

Date: _____

*The Savings Is Fun and L-U-S-O accounts are variable rate accounts and rates are subject to change. At age 12, Savings Is Fun accounts will automatically convert to a L-U-S-O account. **Member share deposit of \$5 compliments of LUSO!***

Please visit our website, www.lusofederal.com, to review current rates. If you have questions regarding our school Banking program, please contact Celia Fernandes at cfernandes@lusofederal.com or 589-9966 x105.



Employee Use Only:

Please check the Account applicable to applicant:

☐ Savings Is Fun Share Account

Received By: _____

☐ L-U-S-O Statement Share Account

Date: ____/____/____