

Welcoming Your Family to Our Credit Union Family!

Date: _____

Dear

Your family/household member, _____

PLEASE PRINT FAMILY OR HOUSEHOLD MEMBER'S NAME ON LINE CLEARLY

has requested membership in the **G.A.P. Federal Credit Union**. New Federal regulations require that we verify that the individual applying for membership is related or lives in your household. Would you be kind enough to check the box that represents your relationship to your family member and then sign this form? Once you've checked the box and signed this form, your relative may return it to us and we'll promptly process their membership. We're very excited that your family member is about to join over 3,000 other **G.A.P. Federal Credit Union** members who trust and depend on our excellent service and many **FREE** products!

Thanks for your assistance!

The applicant is my . . .

- Spouse
- Parent Stepparent
- Sibling (Brother/Sister) Stepsibling
- Grandparent Adopted children
- Grandchild Household Member*
- Child (*This individual lives in my home and contributes financially to household expenses.)



I certify that the above applicant is related to me or is a household member.

(Credit Union Member, please sign here) (Credit Union Member, please print your name clearly here) (Print your account number here)