



Membership Application - Renewal

January 1 – December 31, 2021

1434 Duke Street Suite 200
Alexandria, Virginia 22314

Phone: (202) 581-6900
Fax: (703) 348-7602

Credit Union Information

Credit Union Name: _____ Website: _____

Credit Union CEO: _____ Phone Number: _____

Address: _____ Total CU Assets: _____

City: _____ ST: _____ Zip Code: _____

Memberships

- Up to \$100 million - **Complimentary**
- \$501 - \$750 million - \$ 899
- \$101 - \$250 million - \$599
- Greater than \$751 million - \$1,099
- \$251 - \$500 million - \$699

Primary Member Contact Information

First Name: _____ Last Name: _____

Title: _____ Phone Number: _____ Extension: _____

Fax Number: _____ Email address: _____

Additional Members to Include in Directory

2. Name: _____ Email Address: _____ Title: _____

3. Name: _____ Email Address: _____ Title: _____

4. Name: _____ Email Address: _____ Title: _____

5. Name: _____ Email Address: _____ Title: _____

6. Name: _____ Email Address: _____ Title: _____

7. Name: _____ Email Address: _____ Title: _____

8. Name: _____ Email Address: _____ Title: _____

Payment Information

Credit Card:     Check Enclosed #: _____ TOTAL: \$ _____

Card Number: _____ Expiration Date: _____ Security Code: _____
(mo/yr) (3 digit code on back)

Cardholder Name: _____ Authorized Signature: _____

Card Billing Address: _____ Billing Zip Code: _____