



2017-2018 Pre-Registration Form

Please complete the information below and return this pre-registration sheet to your child's teacher by **August 31, 2017**. For those opening a new account, please attend the required Registration Night on September 14, 2017 from 5:00 – 7:00 pm at the cafeteria. Items you will need to bring to the registration session include:

- Adult(s)/joint owner on account- current photo ID
- Students social security number/card
- Verification of adult(s)/joint owners' physical address
- \$6.00 (\$1.00 membership fee + \$5.00 minimum share balance)

Students with an existing HFS FCU account may participate by checking the box below. Please note that without this authorization, we will not be able to accept deposits for your child's account at the Kea'au Elementary School Deposit Days.

I authorize my child to make deposits to their current HFS FCU account at the school Deposit Days.

Account Number: _____

Parent/Guardians Signature: _____

Child's Information (required for all participants):

Name _____

Mailing Address _____

Residence/Street Address _____

Home Phone Number _____

Date of Birth _____

Mother's Maiden Last Name _____

Please complete the information below to open a new account for your child.

Parent 1:

(Provide the parents information that will be joint on the savings account with the child.)

Name _____

Mailing Address _____

Residence/Street Address _____

Home Phone Number _____

Date of Birth _____

Employer _____

Employer's Address _____

Employer's Phone No _____

Driver's License Number _____

Email Address _____

Parent 2:

(Complete this section if both parents will be joint on the savings account. Both must be present to sign at account opening.)

Name _____

Mailing Address _____

Residence/Street Address _____

Home Phone Number _____

Date of Birth _____

Employer _____

Employer's Address _____

Employer's Phone No _____

Driver's License Number _____

Email Address _____



Federally Insured by NCUA