

Sponsoring Member Name _____	Date _____
Member Account Number _____	
Daytime Phone Number _____	
Alternate Phone Number _____	

As a member (primary signer of an existing account) of Santa Clara County Federal Credit Union, I hereby sponsor _____ for an application of membership with the Credit Union. This applicant is related to me in the following manner: (Please check the applicable box)

- | | | | |
|--|--------------|-------------|--------|
| Spouse | Sibling | Child | Parent |
| Grandparent | Grandchild | Step-Parent | |
| Step-Child | Step-Sibling | Adoptive | |
| Household/We Maintain a Single Economic Unit | | | |

By signing this Letter of Sponsorship, I hereby acknowledge that the above information is an accurate and honest declaration of this applicant's eligibility for membership with Santa Clara County Federal Credit Union.

 Sponsor's Signature Date

Credit Union Use Only	
Sponsor's Account & Status Verified:	
Yes	No/Reason: _____
New Member's Name: _____	
New Account # Opened: _____	
CU Representative: _____	
Date Completed: _____	