



1. Eligibility

We are a member of Christian Community Credit Union. Account Number: _____
 Notice to New Applicant: The following applies if you are not already a member of Christian Community Credit Union (CCCU). We hereby apply for membership in CCCU with this application and certify that we qualify for membership based on the relationship stated below. If our application is approved, we understand that CCCU's non-refundable membership fee of \$5 will be charged to our credit card account, if not paid separately. It is further understood that to continue a CCCU membership, we must maintain this credit card account relationship or separately establish a member savings or checking account should we discontinue this credit card account. We are eligible to join CCCU because our ministry/business is affiliated with or is a member of one or more of the following organizations (check all that apply):

- American Baptist Churches, USA
- International Church of the Foursquare Gospel
- Approved by the board of CCCU
- Christian Management Association (CMA)
- All owners, partners or stockholders are within the CCCU field of membership (please provide list of names and eligibility)
- Other: _____

2. Ministry/Business Information

MINISTRY/BUSINESS NAME AS YOU WOULD LIKE IT TO APPEAR ON THE CARD (limited to 23 characters including spaces)

LEGAL NAME OF MINISTRY/BUSINESS		EMPLOYER ID NUMBER OR TAX ID NUMBER	
DBA if any			
STREET ADDRESS (No P.O. Box please)		CITY	STATE ZIP
MAILING ADDRESS (If different from above)		CITY	STATE ZIP
PHONE	FAX	WEBSITE	PRIMARY BANKING CONTACT PERSON
PASTOR/CEO NAME	YEAR BEGAN	CHURCHES PLEASE COMPLETE THIS SECTION	
		RESIDENT CHURCH MEMBERSHIP:	AVERAGE ATTENDANCE AM WORSHIP SERVICE:
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation (Non-Profit)	<input type="checkbox"/> Corporation (For-Profit) <input type="checkbox"/> Unincorporated Association (Non-profit)

3. Contact Person

CONTACT NAME	POSITION/TITLE
CONTACT PHONE	E-MAIL ADDRESS

4. Tax I.D. Number Verification

Certification: Under penalties of perjury, we certify that (1) the number shown on this form is our correct Taxpayer Identification Number, and (2) We are not subject to backup withholding because (a) We are exempt from backup withholding or (b) We have not been notified by the Internal Revenue Service (IRS) that we are subject to backup withholding as a result of failure to report all interest or dividends, or (c) the IRS has notified us that we are no longer subject to backup withholding. We must cross out items (2) above if we have been notified by the IRS that we are currently subject to backup withholding because of underreporting interest or dividends on our tax return.

SIGNATURE FOR CERTIFICATION OF TAX ID NUMBER X	PRINTED NAME	POSITION/TITLE	DATE
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5. Financial Information

AMOUNT OF CREDIT LIMIT REQUESTED \$	If the credit limit you are applying for is above \$10,000, please provide us copies of your two most recent fiscal year-end and current year-to-end date income and expense statements.		
>> INCOME STATEMENT SUMMARY			
	CURRENT YEAR-TO-DATE (Up to and including last 30 days)	PREVIOUS FISCAL YEARS	PREVIOUS TWO FISCAL YEARS
DATE	/ /	/ /	/ /
ANNUAL INCOME (All sources)	\$	\$	\$
ANNUAL EXPENSES	\$	\$	\$
NET GAIN OR LOSS (Please attach a statement explaining any substantial loss)	\$	\$	\$
>> DEPOSITS			
NAME OF FINANCIAL INSTITUTION (1)	TYPE OF ACCOUNT	INTEREST RATE	MATURITY DATE if any
			CURRENT BALANCE \$
NAME OF FINANCIAL INSTITUTION (2)	TYPE OF ACCOUNT	INTEREST RATE	MATURITY DATE if any
			CURRENT BALANCE \$
NAME OF FINANCIAL INSTITUTION (3)	TYPE OF ACCOUNT	INTEREST RATE	MATURITY DATE if any
			CURRENT BALANCE \$

NAME OF FINANCIAL INSTITUTION (4)	TYPE OF ACCOUNT	INTEREST RATE	MATURITY DATE if any	CURRENT BALANCE \$	
NAME OF FINANCIAL INSTITUTION (5)	TYPE OF ACCOUNT	INTEREST RATE	MATURITY DATE if any	CURRENT BALANCE \$	
NAME OF FINANCIAL INSTITUTION (6)	TYPE OF ACCOUNT	INTEREST RATE	MATURITY DATE if any	CURRENT BALANCE \$	
> > SCHEDULE OF OUTSTANDING LOANS/LEASES					
CREDITOR (1) NAME AND ADDRESS	TYPE OF LOAN	MONTHLY PAYMENT	INTEREST RATE	ORIGINAL AMOUNT \$	CURRENT BALANCE \$
CREDITOR (2) NAME AND ADDRESS	TYPE OF LOAN	MONTHLY PAYMENT	INTEREST RATE	ORIGINAL AMOUNT \$	CURRENT BALANCE \$
CREDITOR (3) NAME AND ADDRESS	TYPE OF LOAN	MONTHLY PAYMENT	INTEREST RATE	ORIGINAL AMOUNT \$	CURRENT BALANCE \$
CREDITOR (4) NAME AND ADDRESS	TYPE OF LOAN	MONTHLY PAYMENT	INTEREST RATE	ORIGINAL AMOUNT \$	CURRENT BALANCE \$
CREDITOR (5) NAME AND ADDRESS	TYPE OF LOAN	MONTHLY PAYMENT	INTEREST RATE	ORIGINAL AMOUNT \$	CURRENT BALANCE \$

6. Designated Cardholders

Please provide the name(s) of the authorized cardholder(s). Each Credit Card will include the individual name and the Ministry/Business name. Each separate account must have a designated credit limit. The combined limit for all cards cannot exceed the total credit limit. Attach a separate sheet if more accounts are needed.

Important information about procedures for opening a new account: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means to you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

> > CARDHOLDER INFORMATION (Names on cards are limited to 19 characters including spaces.)

CARDHOLDER (1) PRINTED NAME		HOME ADDRESS			
BIRTH DATE	SOCIAL SECURITY #	DRIVER'S LICENSE	STATE	HOME PHONE NUMBER	CREDIT LIMIT \$
CARDHOLDER (2) PRINTED NAME		HOME ADDRESS			
BIRTH DATE	SOCIAL SECURITY #	DRIVER'S LICENSE	STATE	HOME PHONE NUMBER	CREDIT LIMIT \$
CARDHOLDER (3) PRINTED NAME		HOME ADDRESS			
BIRTH DATE	SOCIAL SECURITY #	DRIVER'S LICENSE	STATE	HOME PHONE NUMBER	CREDIT LIMIT \$
CARDHOLDER (4) PRINTED NAME		HOME ADDRESS			
BIRTH DATE	SOCIAL SECURITY #	DRIVER'S LICENSE	STATE	HOME PHONE NUMBER	CREDIT LIMIT \$
CARDHOLDER (5) PRINTED NAME		HOME ADDRESS			
BIRTH DATE	SOCIAL SECURITY #	DRIVER'S LICENSE	STATE	HOME PHONE NUMBER	CREDIT LIMIT \$

7. Automatic Payment Option

Total Amount Due (Recommended) Minimum Payment Due

AUTOMATIC CREDIT CARD PAYMENT AGREEMENT

By selecting the automatic payment option, we authorize CCCU to debit the checking account for the credit card(s). We understand that the payment will be deducted approximately 25 days after the closing date of the statement. We understand and agree that in order for CCCU to make any payment requested in this agreement, we must have the payment amount available in the account, or the account may be assessed a fee. If insufficient funds occur three times, the automatic transfer will be automatically revoked. We further understand and agree that CCCU shall not be responsible for any act or failure to act, except in the case of gross negligence or willful misconduct. Furthermore, I agree to hold CCCU harmless from any claims, liabilities, attorneys' fees and other costs and expenses of any and every kind and nature which may be incurred by them by reason of their performance under this agreement.

NAME OF FINANCIAL INSTITUTION	ROUTING NUMBER (MUST BE 9 DIGITS)	ACCOUNT NUMBER

8. Authorization and Acknowledgement of Agreement

CREDIT CARD AGREEMENT: By authorized corporate signatures, we acknowledge that we will be bound by all the terms and conditions of the credit card agreement which will be provided later with or before issuance of cards. If upon receipt and review of said credit card agreement, we do not agree to be so bound, upon receipt of any credit card issued pursuant to this application, we will render same unusable by cutting it in half and will return it to the Credit Union with notice of our intention. We also warrant the accuracy and completeness of information we have supplied herein, acknowledge that CCCU will rely on same in determining to extend credit, authorize CCCU to verify said information by any means, and to report performance under this account to any credit reporting agency. This application is to be submitted with all financial and statistical information requested by CCCU. The authorized corporate officers signed below hereby certify that all information provided in connection with this application is accurate and complete.

AUTHORIZING OFFICER SIGNATURE (PER RESOLUTION)	PRINTED NAME	POSITION/TITLE	DATE
X			
AUTHORIZING OFFICER SIGNATURE (PER RESOLUTION)	PRINTED NAME	POSITION/TITLE	DATE
X			
Credit Union Use Only	APPROVED (AS REQUESTED)	APPROVED (MODIFIED TO)	BY: LOAN OFFICER DATE
	LOAN OFFICER	LOAN COMMITTEE	BY: LOAN OFFICER DATE

9. Corporate Resolution Complete this section if your organization is incorporated

THIS RESOLUTION FORM MUST BE COMPLETED AND SIGNED ACCORDINGLY

I, _____, Secretary of _____ Corporation, do hereby certify that said Corporation is duly organized and existing under the laws of the State of _____; that all franchise and other taxes required to maintain its corporate existence have been paid when due, and that no such taxes are delinquent; that no proceedings are pending for forfeiture of its Charter or for its dissolution voluntarily or involuntarily; that it is duly qualified to do business in that State and is in good standing in that State; that it is duly qualified to do business in all states wherein the character of the property owned by it or the nature of the business transacted by it makes qualification as a foreign corporation necessary; that there is no provision of the Charter or Bylaws of said Corporation limiting the power of the Board of Directors to pass the resolutions set out below, and that the same are in conformity with the provisions of said Charter and Bylaws; that I am the keeper of the records and minutes of the proceedings of the Board of Directors of said Corporation, and that on the _____ day of _____, 20_____, there was held a meeting of the Board of Directors of said Corporation, which was duly called and held in accordance with law, and in accordance with the Bylaws of the Corporation, and at which meeting a quorum of the directors was present, and that at said meeting the following resolution was duly and legally passed and adopted, and that the same has not been altered, amended, rescinded or repealed, and is now in full force and effect:

"BE IT RESOLVED by the Board of Directors of this Corporation that this Corporation does borrow from Christian Community Credit Union from time to time, such sums of money as the hereinafter-named officers of this Corporation may decide are necessary, not to exceed \$_____, the aggregate at any one time."
 "BE IT FURTHER RESOLVED, that any of the following officers of this Corporation, or their successors in office are hereby authorized, in the name of and as the act of this Corporation, to:

1. Borrow, from time to time, such sums of money in the name of and as the act of this Corporation from Christian Community Credit Union at such rate of interest, and at such maturity dates, and on such terms as may be agreed upon between said officers and said Credit Union, and to make, execute, and deliver to said Credit Union notes, drafts, acceptances, agreements, and any other obligations of this Corporation there for in such amount, in such form, and upon such terms as may be agreed upon between said officers and said Credit Union.
2. Mortgage, pledge, assign, or hypothecate and deliver to said Credit Union, upon such terms as said Credit Union may require, as security for money borrowed or credit obtained by this Corporation, any of the real estate, bills receivable, stocks, bonds, accounts, mortgages, merchandise bills of lading, warehouse receipts, insurance policies, certificates, and any other property held by or belonging to the Corporation, with full authority to endorse, assign, or guaranty the same in the name of this Corporation.
3. Discount, rediscount, or sell to said Credit Union any bills receivable or any paper held by the Corporation, and to endorse the same in the name of this Corporation.
4. Withdraw from said Credit Union and give receipts for, to authorize said Credit Union to deliver to bearer or to one or more designated persons, all or any documents, securities, or other property held by it, whether held as collateral security or for safekeeping, or for any other purposes.
5. Authorize said Credit Union to purchase or sell for account of this Corporation stocks, bonds, and other securities.
6. Renew and extend any loan or loans from time to time, and to execute and deliver notes, bonds, or other obligations of this Corporation therefore, and execute such agreements and instruments of extension as said Credit Union may require.
7. Make application for and obtain Letters of Credit from said Credit Union, and in connection therewith to execute and deliver to said Credit Union any and all instruments that said Credit Union may require.
8. Execute and deliver to said Credit Union all instruments required by said Credit Union in connection with any of the foregoing matters, and affix thereto the seal of this Corporation *.

"BE IT FURTHER RESOLVED that all acts of the below-named officers pursuant to this resolution are in all things authorized and made acts of this Corporation".
 "BE IT FURTHER RESOLVED that this resolution, and the authority hereby vested in said named officers, shall continue to be in full force and effect until altered, rescinded, amended, repealed, or changed by subsequent action of the Board of Directors of this Corporation, and until notice thereof in writing is given to said Christian Community Credit Union".

I further certify that the following persons are the officers of this Corporation who are authorized to act and sign in the foregoing resolution, and that the signatures below are the true signatures of such officers. MINIMUM OF TWO SIGNATURES REQUIRED

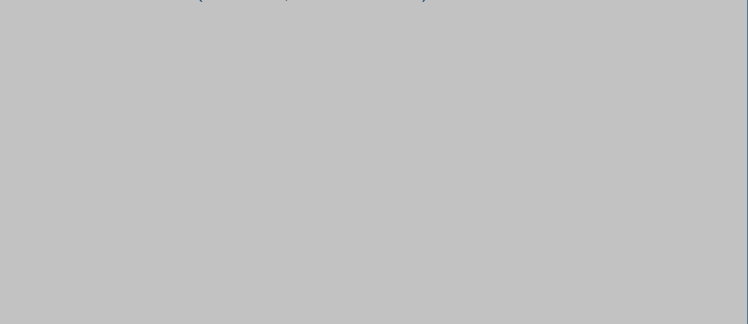
AUTHORIZING OFFICER SIGNATURE (REQUIRED)	PRINTED NAME	POSITION/TITLE	DATE
X			
AUTHORIZING OFFICER SIGNATURE (REQUIRED)	PRINTED NAME	POSITION/TITLE	DATE
X			
AUTHORIZING OFFICER SIGNATURE	PRINTED NAME	POSITION/TITLE	DATE
X			
AUTHORIZING OFFICER SIGNATURE	PRINTED NAME	POSITION/TITLE	DATE
X			

IN WITNESS WHERE OF, I have hereunto affixed my name as Secretary and have caused the corporate Seal of said Corporation to be hereto affixed this _____ day of _____, 20_____

SECRETARY SIGNATURE (REQUIRED)

X _____

IMPRINT SEAL HERE (IF NO SEAL, PLEASE SO STATE)



10. Instructions For Meeting Minutes

Send back the completed application with a SIGNED COPY of the official minutes of the meeting where the board/committee approval was obtained. The minutes must include the following items:

- Certification that the necessary quorum requirements were met
- A clear resolution stating the maximum amount of credit to be approved
- Voting results
- The signature of the official secretary



Christian Community
CREDIT UNION®



Visa Business Platinum Plus Benefits



Since 1994, CCCU has given over\$ 1.7 million to missions and ministries through the credit card program.

- Gives to Missions and Ministries
- Earns CUREward Points for Travel and Merchandise
- No Annual Fee
- Worldwide Acceptance
- Business Hotel Savings
- Auto Rental Collision Damage Waiver
- Global Customer Assistance
- Cardholder Inquiry Service
- 100% Fraud Protection
- Lost/Stolen Card Reporting
- Purchase Security/Extended Protection
- Emergency Card & Cash
- Travel & Emergency Assistance Services
- Lost Luggage Reimbursement
- Roadside Dispatch
- Dining Discounts
- Online Statements
- Consolidated Billing Statement
- Itemized Cardholder Activity Summary Statement
- Single Payment Convenience
- Corporate Liability

Interest and Fees Under This Credit Card Account

The following information is provided pursuant to the Truth in Lending Act/Regulation Z

Annual Percentage Rate (APR) for Purchases	9.90% APR
Other APRs	Balance Transfer APR: 9.90% Cash Advance APR: 9.90% Penalty APR: 17.90%*
Grace Period for repayment of the balance for purchases	25 days for purchases if full balance is paid by due date.
Grace Period for balance transfer and cash advance	None
Method for computing the balance for purchases	Average daily balance (including new purchases).
Annual fee	None
Minimum finance charge	\$1.00
Transaction fee for purchases	None
Transaction fee for cash advances	2% with a minimum of \$5.00.
Balance transfer fee	None
Late payment fee	\$10.00
Returned check fee on payments	\$25.00
Over the credit limit fee	\$10.00 each month the account balance exceeds the credit limit by 20% or \$500, whichever is lower at the cycle closing.
International service assessment fee	1% of transaction amount.

*If your account becomes 2 cycles delinquent at any time, your APR will increase to 17.90% If your APR is increased due to delinquency, the new rate will remain in effect until you have maintained a current payment record for six consecutive cycles, at which time your APR will decrease to the current standard rate.
NOTE: This form was printed on, and the information herein is current as of 01/20/06; it is subject to change after that date. The interest rate is fixed; however, the interest rate and all terms could change sometime in the future. If terms change, you will receive prior notice. To find out what may have changed, call us at (800) 347-2228, or write us at: Christian Community Credit Union, P.O. Box 3012, Covina, CA 91722.