

Select Employee Group Sign-Up

Name of Company: _____

Address: _____

Phone Number: _____

Website (if applicable): _____ Number of Employees: _____

The above-named company would like to make free membership in Mid-State Federal Credit Union available to our employees. We would also like to have our organization made eligible to utilize the services of Mid-State Federal Credit Union as appropriate.

We agree to the following:

- Offer direct deposit and payroll deduction to employees
- Appoint an Ambassador to serve as the main contact for Mid-State FCU
- Provide opportunities for Mid-State FCU to visit with our employees, offer financial literacy seminars (schedules permitting), and communicate with them through the appointed Ambassador

Mid-State FCU agrees to the following:

- Make all of their products and services available to the employees
- Provide outstanding service at all times
- To not pressure any employee of the company to do anything at any time (open accounts, take loans, etc.)

Ambassador Name: _____

Phone (required) _____ E-Mail (required): _____

This is a non-binding contract that can be voided at any time by either party.

Accepted for Company by: _____

Print Name & Title: _____

Accepted for Mid-State FCU by: _____

Mail or Fax Completed Form to:

Mid-State Federal Credit Union
217 Roosevelt Ave.
Carteret, NJ 07008
FAX: (732) 541-4449

Or **Scan and E-Mail** form to info@midstatefcu.org