



California Adventist Federal Credit Union

1441 E. Chevy Chase Drive, P.O. Box 9513

Glendale, CA 91206

Phone (818) 246 - 7241

Email: operations@cafcu.net

Website: www.cafcunet

MEMBER REFFERAL FORM

Existing Member: _____

Existing Member #: _____

New Member: _____

New Member #: _____

New Member Phone #: _____

Account Open Date: _____

This form, once completed, must be filled in the new member's file for reference.

- There is no limit(s) to how many referrals an existing member makes! Refer your co-workers, family, or friends, and enter to win a designated prize!
- To qualify the referring member must open a saving and checking account which **MUST** remain "active."
- All correct "account opening" processes will be followed and need to be met before the account is considered open.
- All applications are subject to review and verification.