



**California Adventist Federal Credit Union**

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

Glendale, CA 91206

Phone (818) 246 - 7241

email: [operations@sdacreditunion.com](mailto:operations@sdacreditunion.com)

website: [www.sdacreditunion.com](http://www.sdacreditunion.com)

## 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.