



**GREENSBORO MUNICIPAL**

**Federal Credit Union**

www.greensboromcu.org

**APPLICATION FOR GMFCU BUSINESS PARTNER**

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Web Site Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Phone No.: \_\_\_\_\_ Contact E-mail: \_\_\_\_\_

Briefly describe the type of business: \_\_\_\_\_

Corporation: \_\_\_\_\_ Partnership: \_\_\_\_\_ Sole Ownership: \_\_\_\_\_ Association: \_\_\_\_\_

Date Business was formed: \_\_\_\_\_ Current Number of Employees: \_\_\_\_\_

<i>Company Officers/Owners:</i>	<i>Titles:</i>
_____	_____
_____	_____
_____	_____

Are you associated with another credit union as a Select Employee Group Business Partner?  
\_\_\_\_\_ If so, which one? \_\_\_\_\_

Submitted by: \_\_\_\_\_  
*Name of Officer/Title* *Date*

Return to: Greensboro Municipal Federal Credit Union  
217 N. Greene Street  
Greensboro, NC 27401  
(336) 373-2090 Fax: (336) 373-5896 Attn: Marketing Department  
[hollyb@greensboromcu.org](mailto:hollyb@greensboromcu.org)

For office use only:  
Distance to nearest GMFCU branch SEG group has access to: \_\_\_\_\_  
Address of nearest GMFCU branch group has access to: \_\_\_\_\_  
Application approved: \_\_\_\_\_  
*Jerry Wise, President/CEO* *Date*

For NCUA use only:  
Approved: \_\_\_\_\_  
*Name:* \_\_\_\_\_  
*Title:* \_\_\_\_\_  
*Date:* \_\_\_\_\_