AMEEN HOUSING CO-OPERATIVE OF CALIFORNIA, INC.

2084 Walsh Avenue, Ste: B1, Santa Clara CA 95050
Phone: 408-986-9786 Fax: 408-986-9787 Website: www.ameenhousing.com

CHECK THE ONE THAT APPLIES TO YOU:

____Application for New Adult Membership - Complete Sections A, B, & C

____Application for New Custodial Membership* - Complete Sections A, B, & C
Custodial Membership is a NON-VOTING, INVESTMENT-ONLY account for ONE minor who is a legal-dependent of an adult AHC Member
Parent or Legal Guardian must review and sign the "Custodial Membership Account Disclosure" if opening this type of membership

____Purchasing Additional shares - Complete Sections A & C; ____Changes in AHC Records - Complete Sections A & B

PLEASE TYPE OR PRINT:

SECTION A

For a Custodial Membership, please enter the parent's or guardian's address, email and phone number

APPLICANT'S NAME:_____IS THE APPLICANT A MINOR?_____

PARENT'S ____ OR LEGAL GUARDIAN'S____ NAME (**for a Custodial Membership**):_____
Check either PARENT or GUARDIAN for a Custodial Membership

ADDRESS:_____

PHONE: (home)_____ (work)_____ CELL:_____

EMAIL: (home)_____ (work)_____ APPLICANT'S DATE OF BIRTH:(mo/da/year)___/___/____

APPLICANT'S SOCIAL SECURITY NO.:_____MEMBERSHIP NO. (If already a member):_____

PARENT/ GUARDIAN'S SSN*:_____PARENT/GUARDIAN'S MEMBERSHIP NO.*:_____

CIRCLE WHERE AND/OR FROM WHOM DID YOU HEAR ABOUT AMEEN HOUSING CO-OP (AHC)?
A. PRESENTATION B. BROCHURE C. WEBSITE D. MASJID E. FRIEND F. OTHER ;WHOM/WHERE?_____

SECTION B

For a Custodial Membership, please enter parent's or guardian's information

PROFESSION:_____ EMPLOYER:_____

COUNTRY OF PERMANENT RESIDENCE:_____ CITIZENSHIP:_____ NO. OF DEPENDENTS:_____

SPOUSE'S NAME & PROFESSION:_____

NAME OF BENEFICIARY:_____ RELATIONSHIP:_____

ADDRESS OF BENEFICIARY:_____ PHONE:_____

PERSONAL REFERENCES:
(1) NAME:_____ RELATIONSHIP:_____

ADDRESS:_____ PHONE:_____

(2) NAME:_____ RELATIONSHIP:_____

ADDRESS:_____ PHONE:_____

CIRCLE TYPE OF INITIAL MEMBERSHIP (*can be changed later by notifying AHC in writing*):
A. BUY A HOUSE B. REFINANCE MORTGAGE C. REMODEL HOME D. INVESTMENT E. OTHER

SECTION C

For a Custodial Membership, parent's or guardian's signature is REQUIRED

NEW ADULT-MEMBERSHIP FEE: US$_____
(**US$100 NON-REFUNDABLE** FEE FOR A **NEW ADULT** MEMBERSHIP)

PURCHASING SHARES FOR: US$_____
(US$100 PER SHARE. **MINIMUM OF 20 SHARES REQUIRED FOR A NEW ADULT MEMBERSHIP**)

CUSTODIAL ACCOUNT DEPOSIT: US$_____
(MINIMUM OF **US$200.00** IS REQUIRED FOR A **NEW CUSTODIAL ACCOUNT**)

TOTAL AMOUNT ENCLOSED: US$_____
(**MINIMUM OF US $2,100.00 REQUIRED FOR A NEW ADULT MEMBERSHIP**)

I/WE HAVE READ THE REGULATIONS & BY-LAWS OF THE CO-OPERATIVE, I/WE UNDERSTAND THEM AND AGREE TO FULLY ABIDE BY THEM. I/WE UNDERSTAND THAT AHC PRIMARILY INVESTS FUNDS IN RESIDENTIAL HOMES AND I/WE HAVE REVIEWED THE OFFICIAL FUND WITHDRAWAL POLICY.

_____/___/_____ _____/___/_____
Signature(s) of Member Date Signature of Spouse Date

---------- FOR OFFICE USE ONLY ----------

DATE RECEIVED:_____ AMOUNT RECEIVED: US$_____ MEMBERSHIP NO._____
NUMBER OF SHARES:____INITIAL OF TREASURER:_____AUTHORIZATION:_____DATE:_____

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CUSTODIAL MEMBERSHIP ACCOUNT DISCLOSURE

1. A "Custodial Membership" is a NON-VOTING, INVESTMENT-ONLY account for a minor legal-dependent of an adult AHC member.

2. The "beneficiary" selected in "SECTION B" on the Custodial Membership Application form MUST be the minor legal-dependent for whom the Custodial Membership account is being opened. The Custodial Membership account is FOR-THE-BENEFIT-OF (*fbo*) the AHC member's minor legal-dependent and is referred to henceforth as "Beneficiary/Custodial Member".

3. The parent or legal guardian signing the original AHC Membership Application for the Custodial Membership account has to be an AHC member in good standing. He/She will be the primary custodian responsible for operating the account, and he/she may deposit funds, transfer funds, withdraw funds, authorize address or other changes on the account and/or close the account.

4. The initial membership fee of US$100.00 is being **waived** for opening a Custodial Membership account at this time.

5. A MINIMUM deposit of **US$200.00** is required to open a Custodial Membership account.

6. A MINIMUM balance of **US$200.00** must be maintained in the account at all times. If the balance falls below US$200.00 the account will be AUTOMATICALLY CONSIDERED CLOSED by AHC.

7. MINIMUM amount for a single deposit is **US$100.00** per Custodial Membership account. Single deposits for less than US$100.00 per Custodial Membership account will NOT be honored by AHC.

8. There will be a PENALTY of **US$100.00** if the Custodial Membership account is closed before the 18th birthday of the minor.

9. A Custodial Membership account will not earn dividends until the balance in a Custodial Membership account at the beginning of the quarter is **US$1000.00 or greater**.

10. After the 18th birthday of the Beneficiary/Custodial Member, the parent or legal guardian (who signed the original AHC Membership Application for the Custodial Membership) may withdraw the funds without the US$100.00 penalty. Or at that time, the Beneficiary/Custodial Member may choose to open an independent, fee-paying, adult membership with AHC.

11. **ONE** minor legal-dependent per Custodial Membership account. A single Custodial Membership account **CANNOT** be combined for several minors. An AHC member may open separate Custodial Membership accounts for each of his/her minor legal-dependents.

12. A Beneficiary/Custodial Member is **ineligible** to purchase a home with an AHC Investment while he/she is a minor.

13. Parents or legal guardians may make monthly deposits (of at least **US$100.00** or greater per Custodial Membership account) by mailing checks to AHC every month. Or, they may choose to give AHC **twelve post-dated checks**. One check would be deposited into the Custodial Membership account after the 5th business-day each month by AHC.

14. **Other requirements stipulated in the By-Laws and Regulations of AHC may be applicable to Custodial Membership accounts.**

I/WE HAVE READ THE DISCLOSURE ABOVE, I/WE AGREE TO FULLY ABIDE BY THEM

_____/___/_____
Signature of Beneficiary/Custodial Member (*if applicable*) Date

_____/___/_____ _____/___/_____
Signature of Member Date Signature of Spouse Date

THIS IS NOT A SOLICITATION TO BUY, SELL, AND/OR SOLICIT BUSINESS AND FINANCING FROM THE GENERAL PUBLIC.
INVESTMENTS ARE RESTRICTED TO QUALIFIED AMEEN HOUSING CO-OP MEMBERS ONLY.