

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) _____ FAX: _____

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 10 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\$1,100.00 IS 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.