

Coverdell Education Savings Account IRA Application

CHILD INFORMATION

First Name	MI	Last Name	Date of Birth	Social Security Number	
Gender:	Male	Female	E-mail Address	Home Phone Number	
Physical Address	City		State	Zip	
Mailing Address (If different from above)	City		State	Zip	
Are you a US Citizen?	Y	N	Permanent Resident?	Y	N

PARENT OR GUARDIAN INFORMATION

First Name	MI	Last Name	Date of Birth	Social Security Number
Farm Bureau Number	State of Membership	Mother's Maiden Name	E-mail Address	
Physical Address	City		State	Zip
Mailing Address (If different from above)	City		State	Zip
Home Phone Number	Work or Alternate Phone Number	Driver's License Number	State	
Present Employer or Business	Relationship to Child			

IRA INFORMATION

Select Type:	Select Contribution Type:	Instructions:
<input type="checkbox"/> Traditional IRA	<input type="checkbox"/> New Contribution for: Prior Year Current Year	→ (Requires Application ONLY)
<input type="checkbox"/> Roth IRA	<input type="checkbox"/> Transfer From Qualified Plan or Existing IRA	→ (Requires Application & Transfer Form)
<input checked="" type="checkbox"/> Coverdell Educational Savings Account	<input type="checkbox"/> Rollover From Qualified Plan or Existing IRA	→ (Requires Application & Rollover Form)

ACCOUNT INFORMATION

MONEY MARKET ACCOUNT IRA

Select your account:

 Performance Money Market
 (\$250 minimum to open)

 Performance Monet Market E-Option
 (\$250 minimum to open. E-Option requires internet access. I understand I will receive my monthly statement electronically.)

 Plus Money Market
 (\$25,000 minimum to open. Monthly Service Fee may apply and eStatements required. Internet access required. I understand I will receive my monthly statement electronically.)

Initial Deposit Amount : \$ _____

CERTIFICATE OF DEPOSIT IRA

\$1,000 Minimum to open a Certificate of Deposit (CD) IRA

Initial Deposit Amount: \$ _____

Term	Preferred Maturity Date
_____	_____
Month(s)	Year(s)

