



Application for Partner Company

Name of Company _____

Address _____ Phone _____

City _____ State _____ Zip Code _____

Mailing Address (if different) _____

Website Address/URL _____

Contact Person _____ Title _____

Contact Email _____ Contact Phone _____

Briefly describe type of business _____

Business is (check one): Corporation Partnership Sole Ownership Association

Date business was formed _____ Present number of employees _____

Company Officers

Titles

_____	_____
_____	_____
_____	_____

Do you have a credit union in TN (Y/N)? _____ If so, which one? _____

Submitted by: _____ Date _____

Name of Company Officer & Title

Return to:

The Tennessee Credit Union

1400 8th Avenue South

Nashville, TN 37203

Fax: 615-259-0357 – Attention: Business Development/Marketing

Email to: memberservices@ttcu.org

Questions? Call 800-622-2535 and ask to be connected to Business Development

For TTCU office use only:

Circle Group Classification: A B C

Distance to nearest credit union branch group has access to: _____

Address of nearest credit union branch group has access to: _____

Application approved: _____ Date: _____

Michael D. Martin, President & CEO, TTCU

For Tennessee Department of Financial Institutions use only:

Approved by: Name: _____

Title: _____

Date: _____