

Utilities District of Western Indiana REMC

P.O. Box 427, Bloomfield, Indiana 47424

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Touchstone Energy® Cooperatives
The power of human connections®

FOR OFFICE USE ONLY:

ACCOUNT NUMBER: _____

Membership Application

DATE: _____

New Application

ID Verified by: _____

Update only, I am an existing member.

PLEASE PRINT

Name of Applicant: _____

If Renting,
Landlord's Name: _____

Mailing Address: _____

City, State, Zip _____

County: _____

Service Address: _____

Home Phone: _____

Cell Phone: _____

Social Security Number: _____

Date of Birth: _____

Email Address: _____

JOINT MEMBERSHIP APPLICANT INFORMATION:

Full Name: _____

Relationship to Applicant: _____

Social Security Number: _____

Date of Birth: _____

Home Phone: _____

Cell Phone: _____

What is the applicant's race? Mark "X" in one or more boxes.

White

Black

Hispanic or Latino

American Indian

Asian or Pacific

Other

(Not of Hispanic Origin)

(Not of Hispanic Origin)

or Alaskan Native

Islander

The data in this question is collected for Federal Government Reporting Purposes Only. There is no penalty for applicants that do not provide this information.

If you would like to get alerts and reminders, please check all that apply:

Due Date & Arrangement Reminder

Past Due Reminder

Account Profile change

Returned check alert

Payment confirmation

Text Message

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Email

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Please select cell phone provider:

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

AT&T

Verizon

Other _____

The undersigned (hereinafter called the "Applicant") hereby requests electric service from the Utilities District of Western Indiana REMC and herewith makes application for membership in said corporation. The applicant agrees to purchase electric energy used at the location covered by this application and agrees to be bound by the Articles of Incorporation, the By-Laws and amendments thereto, and such rules and regulations as may be adopted from time to time by the Board of Directors. Payment for electricity shall include for each member a subscription to the Electric Consumer published by the Indiana Statewide Association of Rural Electric Cooperatives, Inc.

This applicant gives consent to Utilities District of Western Indiana REMC and other businesses contracted by REMC to contact them via telephone, automated telephone dialing system, email and text message for debt collection, pre-planned outages, and marketing purposes.

All statements are true and complete to the best of my knowledge.

Signature _____

Date _____

Signature (Joint Applicant) _____

Date _____