



Make accessing your account...Simple and Convenient...by signing up for online banking.

Electronic Services Access

(Please initial each that apply)

Request for access via: Online Banking _____

Audio Response (A/R) _____

Bill Pay (Checking Only) _____

E-Receipts _____

Account # _____ A/R PIN _____ ; _____ A/R PIN _____

(Additional account numbers may be listed on this application ONLY if all joint ownership is the same. A separate application is required for accounts with different ownership.)

Member Information:

Please list email address for account. _____

| Name | Address | Home Phone | Cell | Username |
|------|---------|------------|------|----------|
| | | | | |

The credit union will set up your initial password using a temporary pin for online access.

By signing this form, you certify that the information on this application is complete, true and submitted for the purpose of obtaining online account access, online Bill Paying Services, and/or Audio Response access.

That you have received a copy of the Credit Union's EFT policy/disclosure or have read it on the credit union website and agree to the terms of the EFT agreement.

Receipt of the applicable fee schedule and consent to the fees disclosed and as may be amended by the Credit Union periodically.

Online (electronic) Bill Pay Fees

- No Monthly Fees, \$5.00 per month if inactive for 60 days.

The following Bill Paying fees are in addition to regular checking account fees

- Merchant Returns \$5.00/ item
- NSF Items \$2.00/item
- Stop Payment \$5.00/item

Member Signature _____

Date _____