



ELECTRONIC STATEMENT DELIVERY AUTHORIZATION

Date: _____

Account Holder Name: _____
Joint Account Holder (If applicable): _____
Account Number: _____ Branch: _____
Email Address: _____

I/We request the Credit Union deliver, and I/we consent to receive, periodic statements relating to my/our loans and accounts electronically, via internet banking only, in which case I/we understand and agree that statements will be accessible via internet banking only. I/We acknowledge that I/we will no longer receive paper statements. **Note:** Electronic statements will be available on-line for a minimum of 3 months from the date each statement is rendered. Should you require a copy for your records, please ensure you either print or save a copy.

Witness/Signature Verification (Credit Union Staff)

Account Holder Signature

Witness/Signature Verification (Credit Union Staff)

Joint Account Holder Signature (if applicable)

Witness/Signature Verification (Credit Union Staff)

Parent/Guardian Signature (if Account Holder is a minor)

PRIVACY

Credit Union and Privacy Legislation prescribe and restrict the use of personal, financial or credit information (Information) without consent. To obtain details about Credit Union policies and procedures for protecting privacy of information and Customer rights please see the privacy section of our website or contact the Credit Union, Attention: Privacy Officer.

FOR INTERNAL USE ONLY: Date Completed: _____ Employee Name: _____
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ELECTRONIC STATEMENT CANCELLATION AUTHORIZATION

Date: _____

I/We request the Credit Union cancel the electronic delivery of periodic statements relating to my/our loans and accounts, via internet banking, in which case I/we understand and agree that statements are to be delivered to me/us via mail and will not be accessible via internet banking.

Witness/Signature Verification (Credit Union Staff)

Account Holder Signature

Witness/Signature Verification (Credit Union Staff)

Joint Account Holder Signature (if applicable)

Witness/Signature Verification (Credit Union Staff)

Parent/Guardian Signature (if Account Holder is a minor)

FOR INTERNAL USE ONLY: Date Completed: _____ Employee Name: _____
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