

ACCOUNT CHANGE CARD

SUBSEQUENT ACTIONS

I/We authorize the Credit Union to make and accept the following changes to my/our accounts:

TYPE OF CHANGE (Please indicate the type of change and complete only the information that affects the change.)

Member/Owner Information	<input type="checkbox"/> CHANGE	Joint Owner(s) Information	<input type="checkbox"/> ADD	<input type="checkbox"/> CHANGE	<input type="checkbox"/> REMOVE		
Agent	<input type="checkbox"/> ADD	<input type="checkbox"/> CHANGE	<input type="checkbox"/> REMOVE	POD/Trust Beneficiary	<input type="checkbox"/> ADD	<input type="checkbox"/> CHANGE	<input type="checkbox"/> REMOVE
Other: _____	<input type="checkbox"/> ADD	<input type="checkbox"/> CHANGE	<input type="checkbox"/> REMOVE	Account Type/Services	<input type="checkbox"/> ADD	<input type="checkbox"/> CHANGE	<input type="checkbox"/> REMOVE

OWNERSHIP INFORMATION CHANGES

Member/Owner:	Member No:
Street:	SSN/TIN:
City/State/Zip:	Date of Birth:
Home Phone: Cell:	Driver's Lic: State:
Work Phone:	Mother's Maiden Name:
E-mail:	Code Word (optional):

The account(s) is a **Joint Account:** with Rights of Survivorship

Joint Owner: If required by the Credit Union, removal of a joint account owner requires consent of all owners, and we will hold the Credit Union harmless for actions regarding account access. The removed joint account owner(s) relinquishes ownership interest including any membership share in the account(s) set forth in the "ACCOUNT TYPE" section. This relinquishment does not affect my/our obligation on any loan accounts.

Joint Owner:	SSN/TIN:
Street:	Date of Birth:
City/State/Zip:	Driver's Lic:
Home Phone: Cell:	Issuing State:
Work Phone:	E-mail:
Joint Owner:	SSN/TIN:
Street:	Date of Birth:
City/State/Zip:	Driver's Lic:
Home Phone: Cell:	Issuing State:
Work Phone:	E-mail:

ACCOUNT DESIGNATIONS

Payable on Death (POD)/Trust Account All Accounts Designate Specific Accounts _____

Beneficiary/POD Payee:	Beneficiary/POD Payee:
Street:	Street:
City/State/Zip:	City/State/Zip:
SSN/TIN:	SSN/TIN:
Date of Birth:	Date of Birth:

Agency Print Name of Agent: _____
 Signature: _____ Date: _____

Other: All Accounts Designate Specific Accounts _____ See Account Authorization Card

ACCOUNT TYPE

Suffix	Suffix
<input type="checkbox"/> Share/Savings: _____	<input type="checkbox"/> Christmas Club: _____
<input type="checkbox"/> Share Draft/Checking: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Share Certificate/Certificate: _____	<input type="checkbox"/> Other: _____

CHECKING ACCOUNT SERVICES

I/We want an ATM/Debit Card:

Overdraft Protection - optional (select 1 transfer priority)

Reg Savings Only Line-of-Credit Only*

Reg Sav then LOC* LOC* then Reg Sav

Specify Other: _____ then _____

*Must apply & qualify for Line-of-Credit

AUTHORIZATION

I/We agree that the changes on this Card amend the previously signed Account Card and are subject to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings Disclosure, Privacy Disclosure, and Funds Availability Policy Disclosure, if applicable, and to any amendment the Credit Union makes from time to time which are incorporated herein. I/We acknowledge receipt of the agreements and disclosures applicable to the accounts and services requested above. If an access card or EFT service is requested and provided, I/we agree to the terms of and acknowledge receipt of the Electronic Fund Transfers Agreement and Disclosure.

If adding a new joint owner(s), I/we authorize the Credit Union to check our account, credit and employment history, and obtain reports from third parties, including credit reporting agencies, to verify my/our eligibility for the accounts and services I/we request.

X		X	
Signature	Date	Signature	Date
X		X	
Signature	Date	Signature	Date

FOR CREDIT UNION USE ONLY See Account Authorization Card

Date of Membership:	Opened/App'd by:	Member Verification:
<input type="checkbox"/> Credit Report	<input type="checkbox"/> Check Verify	<input type="checkbox"/> Direct Deposit
<input type="checkbox"/> Debit Card	<input type="checkbox"/> Overdraft Protection	<input type="checkbox"/> Other