

ACCOUNT CHANGE CARD

Account Number: _____

Account Owner(s) _____

SUBSEQUENT ACTIONS

I/We authorize the Credit Union to make and accept the following changes to my/our account(s):
ACCOUNT TYPE: _____

Change Service as indicated below.

Add Account Owner(s). Add the following account owner on the account designated below.
The account is a multiple party account with rights of survivorship.

New Owner Name: _____ Birth Date: _____

Soc. Sec. #: _____ Phone #: _____

New Owner Name: _____ Birth Date: _____

Soc. Sec. #: _____ Phone #: _____

Remove Account Owner: Remove the following account owner from the account designated above:
_____. We understand the removal of a Joint account owner requires the consent of all
account owners. The removed owner relinquishes all ownership interest. It does not relinquish my/our
obligation on any loan account(s). For deceased owners; provide copy of death certificate.

Delete Payable on Death (P.O.D.) Account Beneficiary

Beneficiary Name: _____

Beneficiary Name: _____

Add Payable on Death (P.O.D.) Account Beneficiary

Beneficiary: _____ Beneficiary: _____

Address _____ Address _____

SSN _____ DOB _____ SSN _____ DOB _____

Change Name Change my name as follows:

Old Name: _____

New Name: _____

NOTE: Please submit copy of court order, marriage certificate, etc. showing authority of name change.

Touch Tone Teller Transfers:

Add Cancel from: _____ to _____
acct. # suffix(es) acct. # suffix(es)

Add Cancel from: _____ to _____
acct. # suffix(es) acct. # suffix(es)

OTHER: _____

SERVICES TO BE CHANGED

Checking Accounts; Overdraft Protection from; None Regular Share

Overdraft Loan Transfer priority: _____

OTHER: _____

AUTHORIZATION

By signing below, I/we agree that the changes on this form amend the previous account card and are subject to the terms and conditions of the
Membership and Account Agreement, Truth-in-Savings Rate and Fee Schedule, Funds Availability Policy Disclosure, if applicable, and any other
amendment the Credit Union makes from time to time which are incorporated herein. I/we acknowledge receipt of a copy of the Agreements and
Disclosures applicable to the accounts and services requested herein.

X _____
Primary Member Signature/Date

X _____
Joint Owner Signature/Date

X _____
Primary Member Signature/Date

X _____
Joint Owner Signature/Date

FOR CREDIT UNION USE ONLY

Handled by: _____ Date: _____