

ACCOUNT NUMBER

Primary Member	
Joint Owner	
Mailing Address 1	
Mailing Address 2	
City, State, Zip	
Home Phone	Work Phone
Email Address	

New Enrollment

I request a PASSWORD to be set up to access the above named account at SFCU through a service called CU-Online.

By signing below you acknowledge receipt and agree to be bound by the terms and conditions of the most recent CU-Online Disclosure Agreement.

X _____
Primary Member Signature

X _____
(OR) Joint Owner Signature

Currently Enrolled

I am currently enrolled in CU-Online however I am requesting that a new PASSWORD be set up on the above named account at SFCU.

X _____
Primary Member Signature

X _____
(OR) Joint Owner Signature

Bill payer

In order to enable the BillPayer option for this account, you **MUST** have a checking account (suffix 9).

NOTICE: You may enable the "BillPayer" option for one account only, by logging on to CU-Online and utilizing the "Enroll Bill Payer" button. Other restrictions are printed in the *CU-Online Agreement and Disclosure*.

Cross Account Transfers

To Account Number(s):

I hereby authorize Sidney Federal Credit Union to Set up the above accounts to allow the transfer of funds via CU-Online. I understand that this will be in effect until I provide a written request to revoke this authorization, or SFCU deems it necessary to cancel. I also understand that this does not alter, change or recind any prior terms.

X _____
Primary Member Signature

X _____
(OR) Joint Owner Signature