



Services Authorization Form

SUMMIT RIDGE CREDIT UNION

3485 NE Ralph Powell Road, Lee's Summit, MO 64064
Phone: 816-272-6160 Fax: 816-272-6266 Website: www.mysrcu.com

I authorize Summit Ridge Credit Union to activate the following service(s) on my account. (Indicate choice by placing an "X" in the box.)

- Stash Savings Account (Separate account from the regular share savings)
- Payroll Deductions/Electronic Automatic Payments or Deposits/ACH Payments or Deposits
- CuCash Card (ATM Cash only)
- Audio Response Teller (Requires member to choose a 4 digit PIN#) _____, _____, _____, _____
- Online Access & E-statements for Savings/Stash accounts only. (A temporary PIN# will be mailed for Online Access. Please include your e-mail address for E-statements.)

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- Checking
 - Visa Check Card (ATM/Debit Purchase from checking)
 - Overdraft Transfer Protection (Member may choose up to 10 accounts and sequence order for search)
_____, _____, _____, _____, _____
 - Online Access/E-statements/Bill Pay (A temporary PIN# will be mailed for Online Access. Please include your e-mail address for E-statements. Bill Pay service requires a checking account Online Access and E-statements.)

(Important information about Bill Pay...Only enroll in Bill Pay if you intend to use at least one time every six months; otherwise an inactive Bill Pay account will be charged \$5.00 monthly due to inactivity.)

Member Signature

Date

Member Name Printed