



Electronic Statement Request

Date: _____
Account Holder Name(s): _____
Primary Account: _____
Primary Account: _____
Primary Account: _____
Primary Account: _____
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. By completing this request, I/We acknowledge that I/we will no longer receive paper statements. Electronic statements will be available online for a limited time from the statement date. Should I require a permanent record, I will print or save a copy of any statements I require.

Witness (Credit Union Staff)

Account Holder Signature

Witness (Credit Union Staff)

Joint Account Holder Signature (if applicable)

Witness (Credit Union Staff)

Parent/Guardian Signature (if account holder
is a minor)

Credit Union and Privacy Legislation prescribe and restrict the use of personal, financial or credit information without consent. To obtain details about Credit Union policies and protecting privacy of information and Customer rights, contact the Credit Union Privacy Officer.

**SIMPLY COMPLETE THIS FORM AND RETURN TO DEBDEN CREDIT UNION LIMITED BY
FAX, EMAIL, OR DROP IT OFF AT YOUR LOCAL BRANCH.**

FOR INTERNAL USE ONLY:

Date completed: _____ Employee Name: _____