

Millstream Area Credit Union
COURTESY PAY OPT-OUT AND OPT-BACK IN FORM

PURPOSE: You must complete questions 1 and 2. You must sign and print your name below. Use this form when you want to change your options under the Courtesy Pay Program. Do not complete this form if you have applied for and received a separate overdraft line of credit with Millstream. This form will not affect any overdraft lines of credit (loans).

1. MY CHECKING ACCOUNT NUMBER IS: _____

2. IS THIS A JOINT ACCOUNT? ____Yes ____No

OPT-OUT

I/We do not want Millstream to pay my/our overdrafts under the Courtesy Pay Program. Return any overdrafts unpaid that I/we may write. If I/we overdraw my/our account, I/we understand that I/we will be charged an overdraft fee as well as fees imposed by merchants and collection agencies in addition to ultimately paying the overdrawn check.

MEMBER SIGNATURE _____

PRINT YOUR NAME _____ Date: _____

JOINT OWNER SIGNATURE _____

PRINT YOUR NAME _____ Date: _____

OPT BACK IN

I/We have changed our minds and want Millstream to pay my/our overdrafts under the Courtesy Pay Program. I/We agree to pay the Courtesy Pay fees associated with this account as stated in Millstream's fee schedule.

MEMBER SIGNATURE _____

PRINT YOUR NAME _____ Date: _____

JOINT OWNER SIGNATURE _____

PRINT YOUR NAME _____ Date: _____