

# Home Banking Application

Name: \_\_\_\_\_

Soc. Security #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Postal address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of Account: \_\_\_\_\_

Account Number: \_\_\_\_\_

PHONES

Day: \_\_\_\_\_ Evening: \_\_\_\_\_

Co-owner of Account: \_\_\_\_\_

## CREDIT UNION USE ONLY

Routing #: 243083211

CU Identifier: \_\_\_\_\_

Date: \_\_\_\_\_

Sender: \_\_\_\_\_

Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

E-mail: \_\_\_\_\_

## AUTHORIZATION

I **authorize** Alcosé Credit Union to allow Internet Home Banking on the account indicated on this enrollment form. I further understand that applicable service fee(s) associated with the chosen plan will be directly debited from the same account. If, at any time, I decide to discontinue the service, I will provide written notification to Alcosé Credit Union. My use of Internet Home Banking signifies that I have read and accepted all of the terms and conditions of Internet Home Banking service.

Signature: \_\_\_\_\_

*Thank you for signing up to use Internet Home Banking service.  
Your confirmation will arrive via US Mail.*

**SEND THIS FORM TO:** Alcosé Credit Union  
Empire Building • Suite 101  
3001 Jacks Run Road  
White Oak, PA 15131-2555