

CU Online / P.A.T.T.

(Personal Automated Telephone Teller)

Application

Primary Member _____

Social Security # _____ - _____ - _____

Joint Member _____

E-Mail Address _____

Street Address _____

City _____ State _____ Zip _____

Phone # _____ - _____ - _____

By signing below, the undersigned requests the described service and agrees to the terms and conditions governing the services.

X _____ Date _____

X _____ Date _____

For Office Use Only

Primary Acct # _____

Cross Accounts

1. _____

2. _____

3. _____

Pin Setup _____ X-Acct Setup _____

Complete this form and return it to:



PO Box 167
Sparta, WI 54656

Or drop it off at 1st Community Credit Union in Sparta or West Salem