

**Member Name:** \_\_\_\_\_

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

**Email Address:** \_\_\_\_\_

**Products Requested:**     Online Banking                       Bank by Phone                       E-Statements

**PIN Request / Change:**    Please remember this password. You will need it to access Online Banking or Bank by Phone the first time. Once you have logged into the system the first time, you will be asked to change your password. You will retrieve e-statements with the password that you set for PC Banking.

**Online Banking** - Temporary Alpha/Numeric PIN (6-10 digits): \_\_\_\_\_

**Bank By Phone** - Temporary Numerical PIN (6-10 digits): \_\_\_\_\_

**YOU UNDERSTAND AND AGREE THAT:**

You acknowledge receipt of and agree to be bound by Amplify Federal Credit Union's Electronic Funds Transfer Agreement and Disclosure (EFTA). You agree to keep your password secure. You understand that any person having access to your password will be able to access your accounts through Online Banking or Bank By Phone and perform all transactions, including establishing new accounts and withdrawing or transferring funds from any of your accounts.

You authorize Amplify Federal Credit Union to send periodic email alerts to the email address provided above. You also understand Amplify Federal Credit Union will no longer mail monthly paper account statements. A paper account statement can be provided upon request. You understand that you may discontinue this service at any time by contacting Amplify Federal Credit Union at (512) 836-5901 or cumail@goamplify.com.

In order to view your e-Statement, you must have a computer with internet access, and it must be equipped with Adobe® Reader® software. This software is available for download free of charge at <http://www.adobe.com/products/acrobat/readstep2.html>. If the email address for Email Alerts or e-Statements changes, you must update it with Amplify Federal Credit Union, either online or in person, to continue receiving Email Alerts and e-Statements to that email address. If you need assistance updating the email address please contact us at (512) 836-5901 or at cumail@goamplify.com.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Please Mail or Fax Form To:**  
Amplify Federal Credit Union  
P.O. Box 85300  
Austin, TX 78708  
FAX: (512) 491-1018

**Credit Union Use Only:**

\_\_\_\_\_  
Processed By

\_\_\_\_\_  
Teller #

\_\_\_\_\_  
Date Rcvd

\_\_\_\_\_  
Identification Used (required)\*

\*Indicate DL state/number, passport number, etc. If this is a phone request, please indicate method used to positively ID member; i.e.: SSN & DOB