

FIRST CLASS® ... ANYWHERE!®

Home Banking Application



Primary Owner: Account Number: _____ 01

Last Name, First Name, Middle Initial

Street Address

Apartment No./ P.O. Box No.

City, State, Zip Code

Day Phone #

Evening Phone #

Cell Phone #

Email Address

F.I. Use Only Remarks

Signature(s) Required: I/We acknowledge that I/we have received a copy of your First Class...Anywhere! Home banking user(s) Agreement. I/we have read, understand and agree to be legally bound by the terms and conditions of such Agreement. In addition, I/we hereby authorize First Class FCU to obtain a credit report(s) to check my/our history for any or all services. I/we also acknowledge receipt of the disclosure statement informing me/us of our rights under the Electronic Funds Transfer Act. Members 16 & 17 years of age can obtain account access via First Class...Anywhere! with the signature of a parent/guardian. I/we acknowledge that I/we will no longer receive "physical statement(s)" but rather electronic statements that can be printed by me/us. In addition, I/we agree to receive all future statements, disclosures and notices where available to the e-mail account listed above.

Applicant's Signature

Date

Parent/Guardian Signature

Date

F.I. Use Only

Received Date

Approval Date

Activation Date