



## Share Draft / Checking Account Application

### Member Information

Account No. \_\_\_\_\_

Member Name \_\_\_\_\_

Street \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

### Joint Owner Information (If applicable)

Joint Owner \_\_\_\_\_

Street \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

### I/We request the following services (please mark):

- Debit Card
- Audio Response
- Online/PC EFTs
- Bill Payment

*By checking the boxes above and signing below, you certify that the information on this application is complete, true and submitted for the purpose of obtaining the electronic service(s) and account(s) requested. If approved for the requested electronic funds transfer services, you acknowledge receipt of and agree to the terms of the Electronic Fund Transfer Agreement.*

X \_\_\_\_\_ /\_\_\_\_\_/\_\_\_\_\_  
SIGNATURE OF MEMBER DATE

X \_\_\_\_\_ /\_\_\_\_\_/\_\_\_\_\_  
SIGNATURE OF JOINT OWNER DATE

### Please return to:

P&S Credit Union  
2250 S. Redwood Rd.  
Suite # 6  
Salt Lake City, UT 84119

Phone: (801) 973-0575  
Toll Free: (877) 973-0575  
Fax: (801) 797-8654  
Email: [memberservices@pandscu.org](mailto:memberservices@pandscu.org)