

# Goodyear Employees Credit Union Inc.

## E-Statement Registration Form

Ph: 330.724.9391 Fax: 330.724.7212

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

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

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

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

As primary owner of the account referenced above, I hereby request that no account statements be mailed via postal mail and only be sent by email. I agree to receive my monthly or quarterly statement by e-mail. I understand that if I receive my statement via e-mail, I will not receive a paper based statement.

I understand that if I change my e-mail address, I shall notify Goodyear Employees Credit Union in writing of my new e-mail address. If I fail to notify Goodyear Credit Union of my new e-mail address, I understand I may not receive my statement.

I understand that statement information I receive via e-mail will be password protected for my security. I understand that the security of my password is my responsibility and that anyone who has access to my password will be able to view my e-mail statement.  
This request shall remain in full force until revoked in writing.

Signature \_\_\_\_\_