

## **Quaker Oats Credit Union Authorization for Quaker Online Access**

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

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

Social Security Number: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_

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

By signing below, I hereby acknowledge that I have receipt of a copy of the Quaker Online Access Agreement and Disclosure statement. I understand to obtain first time access, I must enter my account number and the primary member's social security number to gain access.

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

Signature: \_\_\_\_\_