



Credit Union

Member Account Access and Change Form

Please complete this form and bring it to Goetz Credit Union, mail it to the address provided, or fax to the number below.

Mailing Address: Goetz Credit Union
1905 Howard
St. Joseph, MO 64501
Fax: 816-232-5791

Date: _____

Account Number: _____

Member Name: _____

Mailing Address: _____

City, State, Zip: _____

Email Address: _____

Initial Activation: Reset Password: E-Statement:

Member's Signature _____

Transfer from Account Number: _____

Signature

Transfer to Account Number: _____

Signature

For your protection, we will verify this signature with the one on your original membership card.

For office use only

Employee Initials: _____ ID/Signature Verified: _____