



Established Member of the Credit Union completes this part only.

As parent / guardian of an established member of the ONE Federal Credit Union I give my student _____ the permission to participate in their school Student Credit Union Program. I understand that by granting this permission that he/she will have access to their credit union account at school. I also understand that my student will be required to obtain my permission to acquire any new services provided by the student credit union.

Student Name: _____ Date of Birth: ____/____/____

Homeroom Teacher: _____ Grade: _____ Account Number: _____

I hereby request and authorize the above student to open the following accounts with their Student Credit Union Program. (Initial all that applies)

_____ Checking Account _____ Debit Card (Checking required)
_____ Online Banking _____ Mobile Banking _____ Lending
_____ Electronic Bill Pay _____ Club Account(s) _____ Automated Telephone Banking
_____ Graduation Growth Fund

**The Graduation Growth Fund is an interest bearing savings account that allows students to deposit money in a higher yield account. The monies deposited into this account are not redeemable until May 31st of the student's year of graduation. If funds are withdrawn a penalty of \$100.00 will be imposed. The purpose of this account is to allow students the ability to watch their savings grow and establish a strong financial future.*

_____ Other (please specify) _____

*If your student wishes to open a checking account and debit card parent or guardian joint ownership is required.

Parent / Guardian Signature: _____ Date: ____/____/____

Parent / Guardian (Printed): _____