



Withdrawal of Consent

I wish to withdraw consent to use my personal information for the following purposes:
(Please check all that apply)

- To provide me with information, through communication channels including direct mail, email or telephone, **about credit union products and services** that (Credit Union name) believes may be of interest to me.
- I understand that (Credit Union name) may continue to provide me with general information on products and services with my account statements and in newsletters.
- To provide me with information, through communication channels including direct mail, email or telephone, **about products and services of affiliates and service suppliers** that (Credit Union name) believes may be of interest to me.
- To use my Social Insurance Number for credit matching purposes. *I understand this will not affect the provision of any credit union services to me.*

I understand I can change my mind regarding these privacy choices at any time.

Name: _____ Telephone No.: _____
(Please print)
Address: _____
Account Number(s): _____ Branch: _____
Signature: _____ Date: _____

Please return this form to your branch, or mail to:

Privacy Officer