Main Office: 215 2nd Ave, New York, NY 10003 Tel.: (212) 533-2980 Fax: (212) 995-5204 www.UkrNatFCU.org

## FLEXTeller HOME BANKING ACCOUNT ENROLLMENT APPLICATION

Please fill out the application below and return to your nearest branch via mail, email, fax or in person. Once your application is received by us, a temporary password will be e-mailed to you. The first time you log on, you will be asked to create your own password. Your new password must be between 10-16 case-sensitive characters containing at least one letter, one number and one special character. You may access FLEXTeller through our website **www.UkrNatFCU.org** Please contact any of our branches if you have a questions or require assistance.

Account Number: User Name: First Name: Last Name:		have two accounts and petween accounts.)
Street Address: State: Zip Code: _	#	Joint Account
Phone: Email Address:		Joint account
Joint Owner Information (if applicable)  First Name:  Last Name:	# #	Joint Account Joint Account
Authorization: I request Ukrainian National Federal Cr banking service and e-Statement service. I accept and forth in the FLEXTeller Account Access Service and e- I had received a copy of the FLEXTeller Account Acce	d agree to abide by the terms a -Satatement Service Agreement ss Service and e-Statement Se	and conditions as set nt. crvice Agreement.
Member Signature	Date	<del></del>
Joint Owner Signature	Date	
Return by mail to: Ukrainian National FCU		
P.O.Box 160 Cooper Station New York NY 10276	Or email to: MemberServices@ukrnatfcu.org	
FOR CREDIT UNI	ON USE ONLY	
Date received	Received/Accepted by	
Access granted Y N		
Date access granted	Reason for denial	
Access granted by		
Approved by	Date	