

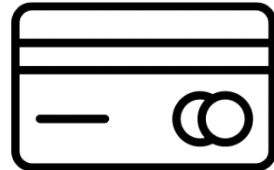
First Initial & Last Name: _____

Birth Month/Day: _____ (ex. 9/16)

For security purposes, only fill out your first initial, last name, month and day you were born.

CHECKING ACCOUNT

Statement ATM Card Balance
ATM Overdrawn Debit Card
Minimum Balance



1. _____ a card issued by a financial institution that can only be used at an ATM.
2. _____ a machine that allows you to do transactions from anywhere.
3. _____ amount of money you have left in your account.
4. _____ to have written checks for more money than you have in your account.
5. _____ the least amount of money you may have in your account before being charged a service charge.
6. _____ monthly documentation of checks written, deposits made, withdraws, transactions, and balances.
7. _____ type of payment where money comes out of your checking account when used.

Return via email to Whitney Landry at
wlandry@bayportcu.org, drop off at any
BayPort branch location, or mail to:

BayPort Credit Union
ATTN: Whitney Landry
One BayPort Way, Suite 350
Newport News, VA 23606