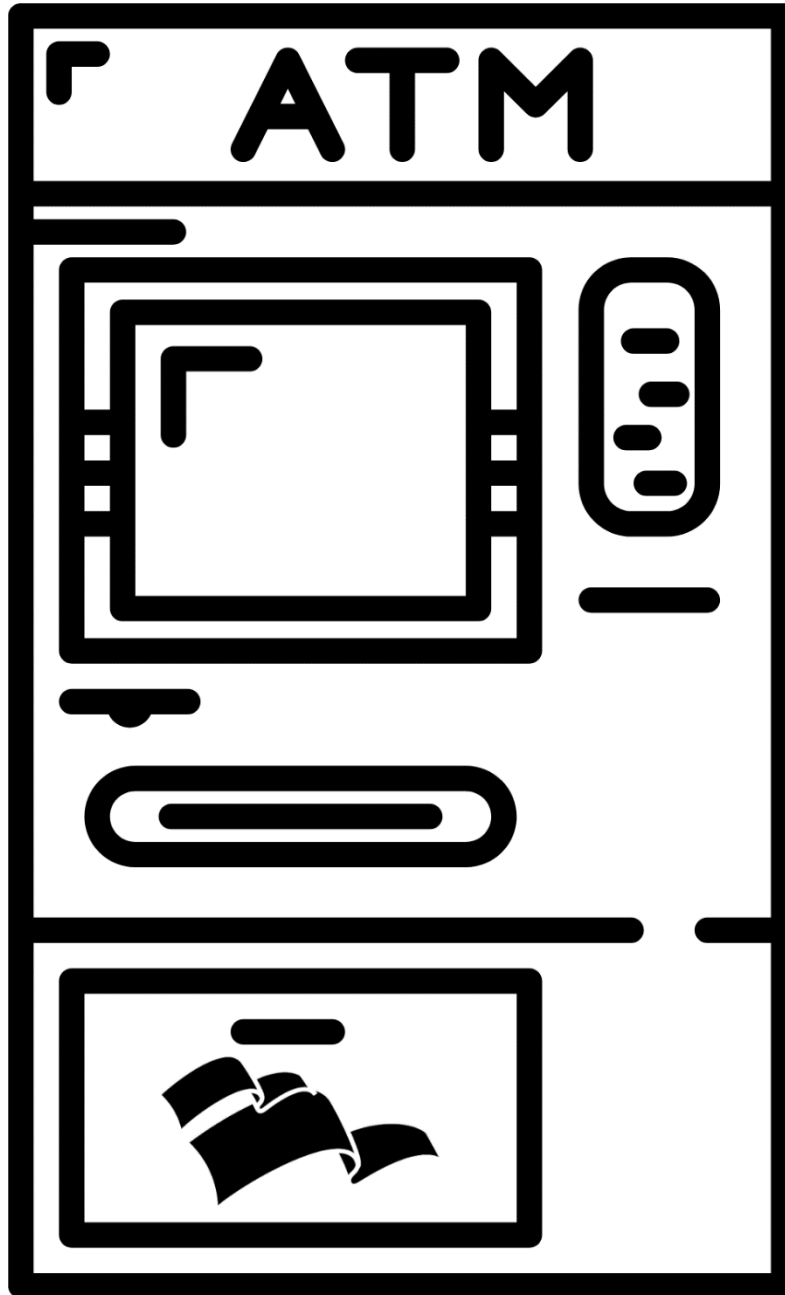


First Initial & Last Name: \_\_\_\_\_

Birth Month/Day: \_\_\_\_\_ (ex. 9/16)

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

# Color the ATM



Return via email to Whitney Landry at [wlandry@bayportcu.org](mailto: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