

**ACCOUNT NUMBER**

Primary Member	
Joint Owner	
Mailing Address 1	
Mailing Address 2	
City, State, Zip	
Home Phone	Work Phone
Email Address	

Temporary

Pin Number

I request a PIN (Personal Identification Number) to access my account at Sidney Federal Credit Union through an Audio Response Teller Line System called ART. If a joint owner name has been entered above, I authorize issuance of the PIN to the named person. I/We understand and agree that the named person be a joint owner of this account with all rights and duties attached to it. I/We further understand that use of this PIN by any joint owner of this account acknowledges receipt and acceptance of all the terms and conditions contained in the Electronic Funds Transfer, Regulation "E" Disclosure. I/We understand that only SIX transfers may be made per month per suffix (ie. savings, checking, money management...) I want to have access to my overdraft line of credit with the ART system.

X \_\_\_\_\_

*Primary Member Signature*

X \_\_\_\_\_

*Joint Owner Signature*

**ART**  
**Phone Numbers**  
**(607) 561-SFCU**  
**(7328)**

or

**(607) 432-1451**

or

**1-800-642-SFCU**  
**(7328)**

*Just a Call Away!*

**Cross Account Transfers**

**From Account Number:**

**To Account Number(s):**

My signature does hereby authorize Sidney Federal Credit Union to set up the above named accounts to allow the transfer of funds FROM and TO, as stated, via ART. I understand that this will be in effect until I provide a written request to revoke this authorization, or SFCU deems it necessary to cancel. I also understand that this does not alter, change or recind any of the previous terms agreed upon when I signed the original ART application and disclosure.

X \_\_\_\_\_

Primary Member Signature

X \_\_\_\_\_

(or) Joint Owner Signature