



## BARB Agreement & Application

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I hereby request access to Choice One Federal Credit Union's BARB system.

I understand I will not receive a printed receipt with each transaction. All transactions will be listed on my regular monthly statements. My PIN is my protection against unauthorized use of my account. It will be kept personal and confidential. It acts as my signature when used in conjunction with my account number to officially authorize the transaction(s) to be completed. I will take all reasonable precautions to protect my PIN and assume full responsibility for all transactions completed on my account when the correct PIN is used.

I will contact the Choice One Federal Credit Union promptly if my PIN is lost or stolen, or if I believe there has been an unauthorized use. I will report such occurrences to the Choice One Federal Credit Union, PO Box 1205, Wilkes-Barre, PA, 18703-1205 or call: **(800) 610-2788**.

Rules established by the credit union's Board of Directors are necessary to protect the best interest of the credit union and to comply with applicable federal and state laws and regulations.



# BARB APPLICATION

Your PIN will be mailed to you. You will be able to access BARB on the business day following the receipt of your application. The application must be signed by you and any joint owners authorized to use your account.

**YES!** I would like to sign up for BARB and make my financial life easier!

Name \_\_\_\_\_ PIN # \_\_\_\_\_

Home Address \_\_\_\_\_

Work Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

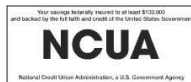
I/We have read and agree to the BARB agreement and acknowledge receipt of the disclosure statement.

Primary Member Signature \_\_\_\_\_

Joint Signature(s) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Call BARB Anytime At:  
(800) 610-2788,  
(570) 823-7676 or (570) 454-0080**



Your savings federally insured to at least \$100,000 and backed by the full faith and credit of the United States Government