

CHRISTMAS CLUB APPLICATION

Start Saving Today For The Next Holiday Season!



Name _____

Acct # _____ Telephone # _____

I hereby authorize Financial Plus to transfer \$ _____ from my: Savings Acct Checking Acct

Transfer: Weekly Bi-weekly Monthly beginning on (date) _____

Based on the beginning date, *Weekly* transfers will continue on same day each week and *Monthly* transfers will be on same day each month.

Signature _____ Date _____

This credit union is federally insured by the National Credit Union Administration.

Return to any Financial Plus Credit Union office or fax to 810-244-2510.

Disclosure:

1. If funds are not in the designated account on the day(s) specified, then no transfer will be made.
2. On the last day of October, the money in your Christmas Club will be automatically transferred to your checking account (or savings account if you do not have a checking account).
3. Dividend payment periods are from January through March, April through June, July through September, October, and November through December. Dividends are compounded and credited to your account on the last day of each dividend period.

Credit Union Use

Date _____

Emp ID _____



www.FinancialPlusFCU.org • (800) 748-0451