

Established Student Member of the Credit Union completes this part only.

As parent / guardian of an established member of The ONE Federal Credit Union I give my student the permission to participate in the at School Student Credit Union Program. I understand that by granting this permission that he/she will have access to their credit union account at school. I also understand that my student will be required to obtain my permission to acquire any new services provided by the student credit union.	
Homeroom Teacher:	Grade: Account Number:
Parent Signature:	
Parent / Guardian Authorization:	
Federal Credit Union at School Student Credi	udent to open the following accounts with The ONE it Union Program. (Initial all that applies)
Club Accounts Checking Mobile Graduation Growth Fund Checks(Circle One: Blue, Yellow, Green	Banking Share Certificate Student Lending
 ALL students requesting the following service Checking (<i>Must be 13</i>) Debit Card (<i>Must be 13</i>) Share Certificate Graduation Growth Fund 	es, require parent or guardian joint ownership:
• Student Lending (Must be 13)	due to either product restrictions and/or collectability.
Parent / Guardian Signature:	
Parent / Guardian (Printed):	