

Securityplus FCU Privacy Preference Form

Please see our Privacy Disclosure Policy for specific details before completing and mailing this form to the Securityplus FCU, Attn: Marketing Department, P.O. Box 7560, Baltimore, MD 21207-0560.

General Information

We share nonpublic personal information only as permitted by law and we will continue to take those actions which are reasonable and prudent to protect the privacy and security of the financial information we obtain through your transactions with us. Some functions are performed by companies contracted by the Securityplus FCU to provide services you have requested, for example check processing, and may involve the transfer of your personal information, which must occur to provide these services. **Please print and read the complete Securityplus FCU Privacy Disclosure.**

“Opt-Out”

As a service to our members, the Securityplus FCU will, upon your request, remove your name from a number of our mailing lists. This means that you will no longer receive announcements from the credit union about products and services that may be of interest to you. **Even if you opt-out, you will continue to be mailed:**

- Your monthly/quarterly statement (which include inserts)
- Tax reporting documents
- Important notices about your account
- The Sharing Times newsletter

You may also receive some mailings that were generated before your “Opt-Out” option is processed.

Primary Member Name _____ **Member Number** _____

Signature _____ **Date** _____

“Opt-In”

If you had previously opted-out of Securityplus FCU mailings and you now wish to be included once again, please sign below and return this form to the Securityplus FCU. We will continue to safeguard your personal and financial information in every way you choose to do business with us.

Primary Member Name _____ **Member Number** _____

Signature _____ **Date** _____