



## CONSENT FORM FOR OVERDRAFT SERVICES

### EXPLANATION OF OVERDRAFT COVERAGE - Your Right to Request Overdraft Coverage

In order for your overdrafts for ATM withdrawals and one-time debit card purchases you make at a store, online, or by telephone to be covered, you must inform the credit union that you want overdraft coverage for these transactions. Even if you do not request overdraft coverage for ATM withdrawals and one time debit card purchases, we may still pay your overdrafts for other types of transactions, including checks.

Having overdraft coverage does not guarantee that we will pay your overdrafts. If we decide to pay an overdraft, you will be charged fees as described below. You have the option to opt out of this service at any time.

Overdraft coverage differs from other overdraft services we offer, such as linking your account to another account with us or an overdraft line of credit. See below for more information, including how to contact us if you want overdraft coverage to apply to your ATM withdrawals and one time debit card purchases.

#### Overdraft Fees

- We will charge you a fee of \$29.00 each time we pay an overdraft.
- There is no limit on the daily fees we can charge you for overdrawing your account.

#### Other Ways We Can Cover Your Overdrafts

We offer other ways of covering your overdrafts that may be less expensive, such as linking your account to another account with us or an overdraft line of credit. Contact us to learn more about these options.

#### How to Request Overdraft Coverage or Get More Information

To request overdraft coverage for your ATM withdrawals and one time debit card purchases, or for information about other alternatives we offer for covering overdrafts, please:

- Contact us at 210.673.5610 or 800.227.5328
- Contact us at [memberservices@airforcefcu.com](mailto:memberservices@airforcefcu.com)
- Complete the form below and mail it to AFFCU, Attn: Member Services, 1560 Cable Ranch Road, Ste. 200, San Antonio, TX 78245-2143

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**CONSENT FORM FOR OVERDRAFT SERVICES**

Printed Name: \_\_\_\_\_ Member Number: \_\_\_\_\_

You can choose to opt-in for all of your accounts under this Member Number, or you may choose specific accounts only. Please check only one:

I want overdraft coverage for my ATM withdrawals and one time debit card purchases on all of my accounts.

I want overdraft coverage for my ATM withdrawals and one time debit card purchases only on the specific accounts listed below:

**SHARE/SAVINGS**

**SHARE DRAFT/CHECKING**

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Member Signature: \_\_\_\_\_

Date: \_\_\_\_\_