

**STREAM LINE ACCESS
ENROLLMENT APPLICATION
AND AGREEMENT**

Please print and complete this application, sign and return it in person, mail or fax to:

River Town Federal Credit Union
PO Box 305, Fort Smith, AR 72902
Fax: (479) 784-5606
Attention: Member Services

Credit Union Acct# _____ E-mail Address _____

Member Name _____ SS# _____ DOB _____

Address _____

City _____ State _____ ZIP _____

Home Phone _____ Work Phone _____

Mother's Maiden Name _____

Upon receipt of your signed enrollment form, River Town Federal Credit Union will issue a 4-digit Personal Identification Number. You will be required to change your PIN upon your initial log on to Stream Line Access. Your temporary PIN will be disclosed to you in person if your enrollment form is brought into the credit union, otherwise it will be disclosed to you by mail or phone.

Personal Identification Number (PIN) Security

You agree to keep your PIN in confidence, to refrain from disclosing your PIN to any third party and to refrain from recording or displaying your PIN in such a manner that it will be accessible by third parties. You agree that the use of the PIN by you, any party to any of your accounts, anyone you permit or authorize to use your PIN, and/or anyone to whom you disclose or give access to your PIN, shall be deemed an authorized user for whom you shall be liable. You will be responsible for reporting the loss, theft, or compromise of your PIN to us as soon as possible after loss, theft, or compromise.

Authorization

By signing below, I am acknowledging this application and certify that all information I have provided is accurate. I agree to comply with all terms and conditions disclosed in River Town Federal Credit Union's Membership and Account Agreement and the Enrollment Application Agreement.

Amendments to this Agreement

We reserve the right to amend this Agreement and to change the terms and conditions governing Stream Line Access services at any time subject to such notice as may be required by applicable law. Your use of this service following receipt of any such notice will constitute your acceptance of any such change. Your use of Stream Line Access is subject to existing regulations governing your Accounts and any future changes to those regulations.

Termination of Services

You agree that we may terminate this Agreement and use of the service if you or any authorized user of your Account or your PIN fail to comply with the terms and conditions set forth in this Agreement, or any other Agreement you have with us, or if we have reason to believe that there has been or may be unauthorized use of your Account or your PIN. You can terminate this Agreement and the Service by notifying us in writing. However, the termination of this Agreement or the Service will not affect the rights and obligations of the parties to this Agreement for transactions initiated prior to termination. Notwithstanding your termination of this Agreement or the Service, you will remain responsible for any transactions initiated by any person to whom you have furnished your PIN.

Member Signature _____ Date _____

River Town Federal Credit Union
1001 South 21st Street, Fort Smith AR 72902
(479) 784-5600
rivertownfcu.org