



SoonerNet Access Authorization

Name (please print) _____

Social Security Number _____

Daytime Phone Number(s) _____

E-Mail Address _____

I request OU Federal Credit Union to make the following account(s) accessible via its SoonerNet Internet banking web site. Please list all the account numbers and suffixes on which you are a signer on and would like internet accessibility.

Account Number Suffixes

Example: 12345 1, 10, 28, 221

By signing this form, I certify I have read the SoonerNet Account Access Agreement, and agree to abide by all of the terms set forth in the SoonerNet Account Access Agreement. I also certify I am a signer on the above listed account(s).

Signature: _____ Date: _____

You may deliver the completed form to any of our conveniently located branches or

You may mail the completed form to **PO Box GG, Norman, OK 73070-7108**

You may fax the form to **(405) 325-7931**

You may scan and email the form to info@oufcu.com

For OUFCU Use Only

Processed By

Date