



**OVERDRAFT PRIVILEGE SERVICE
OPT-OUT FORM**

I hereby request that you remove Overdraft Privilege Service (ODP) from my Checking Account.

I understand and agree that by opting out of your ODP Service, the Credit Union will automatically return checks or other items for Non-Sufficient Funds if the available balance in my Checking Account, combined with all other pre-authorized overdraft and transfer accounts, is not enough to cover the item. I understand that an NSF fee will be charged for each item returned.

The following information is required to remove my account from ODP:

Please remove your ODP Service from my Checking Account.

Member Name _____

Account Number _____

Phone Number _____

Signature _____