

Opt Out Form for Sharing Personal Information

□ Do not share my personal information with nonaffiliates to market their products and services to me.

Primary Member Name: Account Number:

Address:

City, State, Zip Code:

Member Signature: Date Signed:

(One form required for each person opting-out)

Completed forms can be returned by fax, mail, or be hand delivered to one of our branches.

Georgia Heritage Federal Credit Union ● PO Box 1920 ● Savannah, GA 31402 ● Phone 912-236-4400 ● Fax (912) 629-4055

Opt-Out 2022

Last Revision Date 06/2019

Georgi	a Her	itage
FEDERAL	CREDIT	UNION

GHFCU Employee Name:

Opt Out Form for Sharing Personal Information

Date Processed:

Date Processed:

Date Processed:

□ Do not share my personal information with nonaffiliates to market their products and services to me.

Primary Member Name: Account Number:

Address:

City, State, Zip Code:

Member Signature: Date Signed:

(One form required for each person opting-out)

For Credit Union Use Only:

Completed forms can be returned by fax, mail, or be hand delivered to one of our branches.

Georgia Heritage Federal Credit Union ● PO Box 1920 ● Savannah, GA 31402 ● Phone 912-236-4400 ● Fax (912) 629-4055

Opt-Out 2022

Last Revision Date 06/2019

Georgi	a Her	itage
FEDERAL	CREDIT	UNION

GHFCU Employee Name:

GHFCU Employee Name:

Opt Out Form for Sharing Personal Information

Primary Member Name:	Account Number:
Address:	
City, State, Zip Code:	
Member Signature:	Date Signed:

Do not share my personal information with nonaffiliates to market their products and services to me.

(One form required for each person opting-out)

For Credit Union Use Only:

Completed forms can be returned by fax, mail, or be hand delivered to one of our branches.

Georgia Heritage Federal Credit Union ● PO Box 1920 ● Savannah, GA 31402 ● Phone 912-236-4400 ● Fax (912) 629-4055

Opt-Out 2022

Last Revision Date 06/2019