

SEG Federal Credit Union--FlexTeller Activation, E-Statements  
Activation And Password Request

To activate your SEG Federal Credit Union account on FlexTeller and E-Statements, please complete this request/activation agreement and mail to the credit union at PO Box 69, Laurel, MT 59044 or fax to 406-628-5759. For security reasons, we need your signature and cannot accept requests by email. You will receive your instructions on how to obtain your temporary password by U.S. mail approximately 3-5 business days after the Credit Union receives your written request. If you have more than one account number, a separate activation request is needed for each account number.

To activate your SEG Federal Credit Union account E-Statement, we need your email address. It is your responsibility to provide written notification to the Credit Union of changes in your email address, failure to do so may result in your internet access being denied. By signing this form you agree that you are able to open a PDF form, so that you can view/print your statement.

Primary Member Name \_\_\_\_\_ Account # \_\_\_\_\_

Joint Owner(s) Name \_\_\_\_\_

Joint Owner(s) Name \_\_\_\_\_

E-Mail address \_\_\_\_\_

Accounts that have the same social security number in common (joint owners) as this account are automatically "linked". You will not be able to perform transactions or view history on the linked account. To view history or perform transactions on the linked account you need to complete a separate FlexTeller Activation Request for that account.

I/we authorize SEG FCU to complete all transactions as authorized by me/us on the above referenced account and sub-accounts, using my password and the FlexTeller system. I/we agree to the terms and conditions as stated in the Electronic Funds Transfer Agreement. I/we understand that my/our password is issued for security purposes. I/we understand that I/we are responsible for guarding my/our password. I/we agree that if I/we give the password to anyone, I/we are giving that person the authority to perform all transactions on my/our account and sub-accounts until such time I/we revoke that authority by changing the password. I/we understand FlexTeller access will remain in place until such time I/we cancel the authorization in writing. I/we understand that e-statements is automatically activated with the activation of FlexTeller and that I/we will not receive statements by mail. I/we understand that with the activation of Flex Teller we will now receive notices via email and/or from the SEG FCU website at [www.segfcu.com](http://www.segfcu.com). I/we understand that it is my/our responsibility to provide written notification to the Credit Union of any change in my/our email address.

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Joint Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

Joint Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

For credit union use only: Set up by \_\_\_\_\_ Date \_\_\_\_\_