



Brunswick
CREDIT UNION

Member Account Information
For Direct Deposit or Pre-Authorized Forms

_____ 849 _____
Transit # Institution # Account #

Select Your Branch: _____

Member Information:

Name _____

Street Address _____

City/Town _____ Province: _____ Postal Code: _____

NAME _____		ACCOUNT # _____	
ADDRESS _____		DATE [][] [][] [][][][]	
		D D M M Y Y Y Y	
CITY _____	PROVINCE _____	POSTAL CODE _____	
PAY TO THE ORDER OF _____			
VOID			
_____ / 100 DOLLARS			
	Brunswick Credit Union Ltd.		
MEMO _____			
⑆ _____ ⑈849⑆ _____ ⑈			

****Select your branch to get the correct transit number****

I, the above-mentioned member of Brunswick Credit Union, authorize a company to deposit / withdraw funds direct to or from my Credit Union account. I understand that Brunswick Credit Union is not responsible for verifying the accuracy of these deposits / withdrawals to my member account.

Please sign below if needed:

Date

849
Transit
Brunswick Credit Union

Date
849
Transit