

INNOVATION CREDIT UNION

WITHDRAWAL OF CONSENT TO COLLECT AND DISCLOSE PERSONAL INFORMATION

Date:

Name of Account Holder:

Member Number:

Innovation Credit Union has collected and used your personal information since you began receiving services from the credit union. Innovation Credit Union continues to collect and uses member/customer information for the following purposes:

- understand your needs and eligibility for products and services
- open, maintain and administer your account and provide you with financial services that meet your needs;
- obtain credit reports and evaluate your credit rating and credit worthiness;
- administer and manage security and risk in relation to your account and the financial services provided to you;
- comply with legal and regulatory requirements;
- assist in dispute resolution;
- offer and provide you with the other products and services of the credit union and of its affiliates and service suppliers;

I wish to withdraw consent for the following purposes. Please check all that apply:

- To provide me with information, by direct mail, telephone or other means, on credit union products and services that you believe may be of interest to me.

I understand you may not be able to provide you benefits, services or information which may be of value to me, but that you may continue to provide me with information on its products and services with my account statements and in your newsletters.

- To provide me with information on the products and services of the your affiliates and service suppliers that the you believe may be of interest to me.

I understand I may not receive information on the products or services of your affiliates or service suppliers that may be of value to me.

- To use my Social Insurance Number for credit matching purposes. This will not affect the provision of any credit union services to me.

Please understand that a reasonable time period may be required to process this request and to terminate any current use of your personal information for the stated purposes. Innovation Credit Union will continue to use your personal information and disclose this information for purposes that have not been withdrawn, to process or report your account information, or where required for credit reporting, collection of overdue accounts, or as required by law.

I understand I can change my mind on these choices at any time.

Name: (please print) _____

Signature: _____

Address: _____

Date: _____

_____ Telephone Number: _____

_____ Account Number(s): _____

These forms can be mailed to or dropped off for the privacy officer at:

Privacy Officer
Innovation Credit Union
PO Box 1090, STN Main
Swift Current, SK. S9H 3X3