

Online Banking Reactivate Request Form

Complete all requested information and send to Central Operations for Imaging.

Note: Email address is required for Online Banking reactivation.

| Information | |
|------------------------|--|
| Member Number: | |
| Member Name: | |
| Requested Date: | |
| Email Address: | |

I authorize HawaiiUSA Federal Credit Union to reactivate my Online Banking access.

Member Signature

Date

Credit Union Use Only

Accepted By:

Print Name:

Date:

Processed By:

Print Name:

Date: