



Cancellation Request Member Draw

I hereby request that my participation in the Member First Credit Union Member Draw be cancelled. I understand that this cancellation will mean that no further deductions will be taken from my account.

I also understand that I remain in the draw and am eligible to win prizes until my current deduction expires.

Account Number:

Date of Birth:

Name:

Address:

Member Signature:

Date:

OFFICE USE ONLY:

Instruction received by: [operator initials]

Deleted from pick file by:

Date:

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Member First Credit Union Ltd. is regulated by the Central Bank of Ireland