

**AmeriChoice Federal Credit Union**  
Colts CU Student Branch  
Cedar Cliff High School  
Permission Form

**Student Information:**

Student Name \_\_\_\_\_

Street Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Social Security Number: \_\_\_\_\_

**Parent/Guardian Authorization:**

I hereby request and authorize the above student to open the following accounts with AmeriChoice Federal Credit Union: (Circle all that applies)

Savings\*      Checking      ATM/Debit Card      Other

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian (Please Print):** \_\_\_\_\_

\*If your student is interested in opening an account other than a basic savings, a parent/guardian is required to be a joint owner on the account. All joint owners will be required to supply identifying documents and information, such as a driver's license, at account opening. Stop by our Highland Park Branch and speak with Alice Crossland, Member Service Representative:

Highland Park Branch  
433 South 18<sup>th</sup> Street  
Camp Hill, PA 17011  
(717) 920-4690

**Hours:**

Mon.-Wed.: 8:00 a.m. - 4:30 p.m.  
Thurs.-Fri.: 8:00 a.m. - 6:00 p.m.  
Sat.: 8:30 a.m. - 2:00 p.m.

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**Official Use Only:**

MSR: \_\_\_\_\_

Date Received: \_\_\_\_\_