



GEORGETOWN UNIVERSITY
ALUMNI AND STUDENT
FEDERAL CREDIT UNION
www.guasfcu.com

3700 O Street, NW
Washington, DC 20057
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(202) 338-7635 - Fax
help@guasfcu.com

CLOSED ACCOUNT AGREEMENT

To close your Credit Union account, please complete the following information. You may close your account in person or by faxing this form to the Credit Union. All outstanding transactions must clear before your account can be closed – including all VISA CheckCard authorizations. Please be aware that if you close your account while you have outstanding checks, your checks will be returned unpaid. If your closing balance is greater than \$1,000.00, a 24-hour request may be necessary. Should GUASFCU have to mail a check to you to close your account, please be aware that there is a \$5 Cashiers Check fee. Should a wire be requested in closing the account, there is a \$15 fee to complete the wire.

MEMBER INFORMATION

Credit Union Account Information

Account Number:

Contact Phone Number:

 -

Name:

E-Mail:

Permanent Contact Information

Address:

City, State, Zip:

Do you currently receive a monthly QuickPay deposit?

Yes

No

If you answered yes, you will also have to complete a QuickPay Cancellation form.

ACCOUNTS TO CLOSE

Savings Account

I would like to close my savings account:

\$, .

Checking Account

I would like to close my checking account:

\$, .

Amount

Enter the total amount in US Dollars.

\$, . /USD

Method of Closure

- Donation to George Houston Literacy Fund
financial literacy programs both on and off campus
- Cashier's Check
will take an additional 24-hours to process
- Cash Withdrawal

Disclosure and Agreement

My closing the accounts indicated above, I certify that all outstanding transactions have cleared. I further certify that I have/will promptly discontinue any and all recurring (ACH and VISA CheckCard) debits to this account. I understand that failure to do may result in my account being reopened and the transaction, and associated penalty fees, being posted. I agree to any fees associated with closing the account including, but not limited to, wire and bank check fees as stated in the GUASFCU Truth-In-Savings disclosure. If I received a monthly QuickPay deposit into my GUASFCU account, I have also completed the necessary QuickPay cancellation forms.

SIGNATURE

DATE



Close Account Survey

1. Circle the category that best describes you:

Freshman Sophomore Junior Senior Graduate Student Alumni

2. Why are you closing your account?

Access to local branches Looking for better rates Need additional services
 Moving away ATM access Dissatisfaction with GUASFCU
 Other: _____

3. Have you used any of the following GUASFCU services:

Free Online Banking	Yes	No
Quickpay	Yes	No
eStatements	Yes	No

4. Did you know that GUASFCU has 37,000 surcharge free ATMs around the United States through the Allpoint ATM network?

Yes No

5. How would you rate the Credit Union on:

Member Service	Poor	Average	Excellent	N/A
Teller Window	Poor	Average	Excellent	N/A
Online Banking	Poor	Average	Excellent	N/A
ATM availability	Poor	Average	Excellent	N/A
Telephone Services	Poor	Average	Excellent	N/A
Savings Rates	Poor	Average	Excellent	N/A

6. Are there any improvements we can make with regards to these services that would convince you to keep your GUASFCU account?

7. Would you consider GUASFCU for a loan in the future? Yes No

Thank you for completing this survey.