

YES I OPT IN TO THE MTCU Skip a Payment Program....

Member Number _____, (please print)

Loan # _____ Payment amount to Skip _____ Donation is \$5.00 per loan per month

By signing and dating the coupon, you agree to amend the terms of your original loan agreement(s) by two months due to the skipped payment. You also agree to repay the entire unpaid balance of your MTCU's loan(s) at the interest rate and according to the payment schedule dated on your original loan agreement(s) if applicable. You agree to the terms of the MTCU Skip a Payment Program.

You agree as long as the donation is in your account, and your account is current, MTCU will honor your request ***unless you Revoke your Right in writing***. Once the Skip a Payment is revoked by you, MTCU will not allow the reinstatement of the Skip a Payment Program and you will be responsible for all payments due. Any faxed transmission of your signature may be held equally enforceable as your genuine signature.

If your loan payment(s) are made through payroll deduction or automatically from another financial institution, your money will be directed to your primary savings account for the months you have skipped.

Please take my donation from my Checking/Savings Account # _____. **I understand the funds must be available on June 30th each month. I understand that MTCU will deduct my donation on July 1st annually. I also understand if funds are not available or my loan is delinquent on July 1st that I will be disqualified from the Skip a Payment program.**

Primary Borrower _____ Date _____

Thanks but I do not want to Enroll in the Skip a Payment _____ Date _____