



**Joint Owner Removal Form**

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

I, \_\_\_\_\_, understand and agree that  
my name is being removed from account number \_\_\_\_\_  
in the name of \_\_\_\_\_  
name(s) remaining on the account

Checking \_\_\_\_\_ Primary Savings \_\_\_\_\_ Other \_\_\_\_\_  
(please specify)

\_\_\_\_\_  
Signature \*

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State

\* Signature must be notarized if this form is not signed at Windsor Locks Federal Credit Union

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_

My commission expires \_\_\_\_\_

Notary Signature \_\_\_\_\_

\_\_\_\_\_  
Date received Employee

\*Once this "Joint Owner Removal" form is signed, the Credit Union cannot be held responsible for any direct deposits into the account or electronic debits from the account in the name of the signee. The signee is responsible for making any necessary modifications.