



838 Eglin Parkway N.E.
Fort Walton Beach, FL. 32547-2781
eglinfcu.org

Account: _____

Suffix: _____

Last Name: _____

Dormant Account Reactivation

If you received a notice from Eglin FCU that your account is dormant or about to be dormant, please complete this form to re-activate your account.

Required Information

First name: _____

Last name: _____

Account number: _____

Mother's maiden name: _____

Home phone: _____

Cell phone: _____

Physical address: _____
street city state zip code

Email: _____

Please re-activate my EFCU Account to prevent incurring a monthly \$10 dormant account fee.

Member signature

Date

Internal Office Use Only

Request Received By

Date