



Visa Account Updater Service Opt-Out Form

I would like to opt out of the VISA Account Updater Services for all debit or credit cards on my First Financial Federal Credit Union account. I understand it will be my responsibility to notify merchants who maintain card-on-file information to process recurring payments with any updated information.

MEMBER NAME			
MEMBER ADDRESS	CITY	STATE	ZIP
LAST 5 DIGITS OF ACCOUNT NUMBER			
MEMBER SIGNATURE		DATE	

To submit, please mail the completed and signed form to:

First Financial of Maryland Federal Credit Union
Attention: Operations Center
72 Loveton Circle
Sparks Glencoe, MD 21152

Or, you may drop this form off at any First Financial FCU branch location.