

Add, Change, or Remove Code Word

Use this form to add or update a code word on your account. For account holders 17 years of age or younger, this form requires the signature of a parent or guardian who is on the account.

Please allow 10 business days to process your request upon BECU receipt.

Step 1. Account holder information						
Full Name						
Date of Birth	SSN/TIN (9 digits)			Mother's Maiden Name		
Street Address						
City		State/Provin	nce	ZIP/Postal Code	Country	
Email Address		Phone		ne	Phone Type Home Cell	
Employment Status Employed Self-employed Retired Unemployed Never Employed						
Employer (current or pre	evious if n	ot employed)	Oc	cupation (current or	previous if not employed)	
Step 2. Add or re	move a	Code Wo	rd			
Code words must not include racial slurs, profanity, or other inappropriate language. For more information, please refer to the Member Code of Conduct.						
Code word requirements: • Consists of only a word or phrase						
No punctuation maNot case-sensitive	irks or spe	cial character	S			
No question/answer	er combina	ations				
A. Add or change	code word	. (30 characte	rs ma	ximum, including spa	aces)	
New Code Wo	rd:					
B. Remove code w	ord. (Not	recommended	d)			
Note : A code w you change rat	•		•	of account security. \ord.	We recommend that	

Step 3. Current picture ID

Attach a photocopy of one of the following ID types:



Document Types

- U.S. driver's license / permit / ID
- U.S. passport / passport ID
- Tribal ID

- U.S. territory driver's license / ID
- U.S. State Dept. driver's license / ID
- Mexico consular ID
- Permanent Resident Card
- Current passport (Non-U.S.)
- · Global Entry / Nexus card

Step 4. Acknowledgment and consent

By signing below, I certify that I have personally verified and confirmed that all information provided and displayed in this form is accurate, complete, true, and submitted for the purpose selected above. I understand that BECU will rely on such information in BECU's dealings with me.

Signature	Printed Name	Date (MM/DD/YYYY)
Parent/Guardian Signature*	Printed Name	Date (MM/DD/YYYY)

^{*}Required for signers ages 17 and under

If form is not submitted electronically, please return completed and signed form to:

BECU
Attn: Account Servicing M/S 1094-2
P.O. Box 97050
Seattle, WA 98124-9750