



Parent/ Legal Guardian Consent Form

Account Number: \_\_\_\_\_

I/We, \_\_\_\_\_, parent or legal guardian(s) to \_\_\_\_\_, SS# \_\_\_\_\_

DOB \_\_\_\_\_ do hereby authorize \_\_\_\_\_

to open a savings and/or checking account for my minor child(ren) with the True Sky Credit Union.

\_\_\_\_\_  
Parent/Legal Guardian

\_\_\_\_\_  
Parent/Legal Guardian

NOTARY STATEMENT

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Date

My Commission expires: \_\_\_\_\_ Commission #: \_\_\_\_\_

\*This document must be notarized if parent or guardian does not have signature on file