



## PRIVACY: REINSTATEMENT OF CONSENT FORM

I wish to reinstate/give consent to use my personal information for the following purposes:

(check all that apply)

- ☐ **Yes**, you have my permission to provide me with information, through communication channels including direct mail, email or telephone, **about credit union products and services** that Biggar & District Credit Union believes may be of interest to me.

This will include but not limited to:

- loan promotions
- investment opportunities
- marketing material
- internal promotions and contests

- ☐ **Yes**, you have my permission to provide me with information, through communication channels including direct mail, email or telephone, **about products and services of affiliates and service suppliers** that Biggar & District Credit Union believes may be of interest to me.

This will include but not limited to:

- Collabria Card product & services
- CUMIS
- Wyth Financial, AVISO Financial
- Calidon Leasing

- ☐ **Yes**, you have my permission to use my Social Insurance Number for credit matching purposes.

- I understand that my Social Insurance Number is still required for interest bearing accounts and registered products, in accordance with Government of Canada.

\*Not providing your SIN is not a condition of service but may restrict the level of certain services.

- ☐ **Yes**, you have my permission to, provide me with information, through communication channels including direct mail, email or telephone me about participating in any **research or surveys** conducted by the credit union, or its affiliates or service suppliers.

I also understand that I can change my mind on these choices at any time.

Name: \_\_\_\_\_

I would like to be contacted by (fill out all that apply):

Cell#: \_\_\_\_\_ Home#: \_\_\_\_\_

email: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Please indicate which method of contact you prefer (check all that apply):

☐ Calling ☐ Texting ☐ email ☐ mail

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

Please email or mail completed form to:

Attn: Privacy Officer – Shantelle Downton  
Biggar & District Credit Union  
P.O. Box 670  
Biggar, SK S0K 0M0

OR email: [privacy@biggarcu.ca](mailto:privacy@biggarcu.ca)

Any concerns or comments:

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OFFICE USE:	STAMP:
Date Received: _____ Banking System updated by: _____ Comments:   	