



Request for Foreign Currency

Please submit this completed form and a copy of your valid driver's license

Member Name: _____

Address: _____

Email address: _____

Cell phone#: _____

Country(ies) travelling to: _____

Type of currency needed: _____

Amount of US dollars to be exchanged: \$ _____

Departure Date: _____ Return Date: _____

Delivery Information: FLHC FCU suggests that all currency be delivered directly to the credit union office. The member will be notified for pick-up by the next business day.

Is delivery to the credit union OK? _____

If no, please be advised that eZforex and Finger Lakes Health Care FCU are not liable for any lost or stolen packages if the delivery address is modified by the recipient in any way after the order has been processed and shipped. Also, be advised that a signature will be required at delivery to all residential addresses. If you agree to these terms, please initial: _____

Currency Price Protection (if available): CPP will lock in the exchange rate as of the day of the purchase for a fee of \$10, to be returned up to the "Protected Amount" of today's rate. Any amount above the exchanged amount that is turned in with CPP will be exchanged at the rate as of the date of return.

Would you like to purchase CPP for \$10 (if available)? _____

Summary of Charges:

Shipping Fee:	\$14.50
CPP (optional):	\$10.00
USD to be exchanged:	\$ _____
Total:	\$ _____