

■ Denied

Employee Signature

SKIP-A-PAYMENT FORM

		_	y Credit Union's Skip-A he terms below, and th	-	
Borrower Name			Member #		
Phone Number			Email		
Apply to t	he eligible l	oans listed below	<i>r</i> :		
Loan #		mount	Month to Sk	Month to Skip	
Loan #		mount	Month to Sk	Month to Skip	
Loan #		mount	Month to Sk	Month to Skip	
Complete this form	IN PERSON	MAIL	FAX	EMAIL	
and return to My Credit Union via the following:	Deliver to your Local Branch	My Credit Union 13016 Highway 287 Haslet, TX 76052	My Credit Union Skip-A-Payment Application (682) 207-3945	Send via email to promos@mycutx.com	
X					
Signature			Date		
for using the Skip-A-Payment prog for each Skip-A-Payment granted	gram will be collecte on the loan. Using tl	d as part of the deferred payr ne Skip-A-Payment program d	e My Credit Union to defer your monthly nent. The Skip-A-Payment program will oes not change the original terms or you ligations past the original contract matu	l extend the final loan payment ur legal obligation to My Credit	
Interest will continue to accrue o	n your balance until	paid up to date. It also adds t	o· the total interest you will pay over th	e life of the loan.	
extended payments beyond the	original loan & GAP	contract. For example: if two	s may affect the amount that the GAP payments are skipped, then those pay otaled. GAP policies are not insurance.	ment amounts may be	
			ortgages, Home Equity, and Credit Cards	_	
	squalify your loan.		nge of this offer. The credit union reservent new loans cannot have the first payr		

Date Received

Comments