

# MMFCU GenerationNOW account Opt-in Form

I would like to opt-in for MMFCU GenerationNOW Account privileges.

Name: \_\_\_\_\_ Member Number: \_\_\_\_\_

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

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

If youth is under 18 years old, parent/guardian name and signature is required below:

Parent Name: \_\_\_\_\_ Signature: \_\_\_\_\_

**For MMFCU Use Only:**

Date Processed \_\_\_\_\_

Processed By \_\_\_\_\_