Privacy Exception Form

IF YOU DO NOT WISH TO LIMIT CONSENT, THERE IS NO NEED TO COMPLETE THIS FORM

If you wish to limit consent, complete this form along with the Withdrawal of Consent Form and Withdrawal Confirmation Letter and return it to us using the address shown below. If you are withdrawing consent on a joint membership, the joint member's name and signature are also required.

Member Name (please print)	
Address	
City, Province	Postal Code
Telephone	E-Mail
Joint Member (please print)	
Address (If different from above)	
City, Province	Postal Code
Telephone	E-Mail

Privacy Officer
Compass Credit Union
1016 Rosser Ave
Brandon, MB R7A 0L6
privacy@compasscu.ca