

## Holiday **Skip A Pay** Form 2026

Member Name			
Address			
City	State Zi	p	
I want to participate in Skip A Pay!	!	Will distribute the same of th	All
Program Details:			
By signing up for the <b>Skip A</b> is 2 bi-weekly or	Pay program, you can ski	p one month (or a one month "equiva	lent," which
To qualify, a loan must be at least When you skip a payment, interest maturity date will then be extended deduction or other automatic deduction(s) normally applied to y	3 months old, and in good twill continue to accumulated by one month (or a one muctions, the deductions will our loan will be deposited in	rans, Mortgages, Lines of Credit and VISA standing.  e on your loan during the month you skip nonth "equivalent.") If your loan is paid voccur as they normally would. Then, the not your share or share/draft account in tag, the payment will not be made. You may	o. Your loan ia payroll amount of the he month you are
Member Number:	I would	like to skip my January or February Paym	nent(s):
☐ Yes, Skip Loan Type:	Payment: \$	(choose <u>one</u> month) ☐ Jan. 2026	□ Feb. 2026
☐ Yes, Skip Loan Type:	Payment: \$	(choose <u>one</u> month) 🗆 Jan. 2026	□ Feb. 2026
I have:  □ Enclosed is a check in t	he amount of <b>\$35.00</b> for <u>eac</u>	<u>ch</u> loan skipped	
☐ Authorized a transfer fi	om my (check <u>one</u> ) 🛚 sha	re (savings)	
Signature	Joint Acc	account ount Holder	
Member Phone number:	er	mail address	

By signing above, you authorize Bethlehem 1st FCU, to extend your final loan payment by one month or a one-month equivalent. Interest will continue to accumulate on your loan during the month skipped. Only loans that are current and in good standing are eligible. We must receive this completed and signed authorization no later than 2 weeks prior to your loan payment due date to be able to accommodate your request. You may only skip a payment on a loan one time in the course of a 12-month period. If your loan is in joint names, this form must be signed jointly.

Complete and sign this form, then mail, scan & e-mail, fax or hand-deliver it to:



Bethlehem 1st FCU 2317 Easton Ave. Bethlehem, PA 18017-5099 E-mail: service@beth1st.org FAX: 610-691-8624

