

# Vacation Skip A Pay Form 2024



Member Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_



By signing up for the **Skip A Pay** program, you can skip one month (or a one month “equivalent,” which is 2 bi-weekly or 2 semi-monthly payments.) There is a modest processing fee of \$30.00 per loan skipped. For your convenience we can deduct the fee from a Bethlehem 1st FCU account, or you can send us payment with your signed authorization. For compliance reasons, Home Equity Loans, Mortgages, Lines of Credit and VISA are not eligible. **To qualify, a loan must be at least 3 months old, and in good standing.**

When you skip a payment, interest will continue to accumulate on your loan during the month you skip. Your loan maturity date will then be extended by one month (or a one month “equivalent.”) If your loan is paid via payroll deduction(s) normally applied to your loan will be deposited into your share or share/draft account in the month you are skipping. If a full payment is transferred from savings/checking, the payment will not be made. You may skip one or all of your loans!

Member Number: \_\_\_\_\_ I would like to skip my **July or August** Payment(s):  
 Skip Loan Type: \_\_\_\_\_ Payment: \$ \_\_\_\_\_ choose one:  July 2024  August 2024  
 Skip Loan Type: \_\_\_\_\_ Payment: \$ \_\_\_\_\_ choose one:  July 2024  August 2024

I have:  
 Enclosed a check in the amount of \$30.00 for each loan skipped  
 Authorized a transfer from my (check one)  share (savings)  share/draft (checking) account

**IMPORTANT: If your loan is in joint names, this form must be signed by both borrowers.**

Signature \_\_\_\_\_ Joint Account Holder \_\_\_\_\_

Phone: \_\_\_\_\_ Email 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 authorization **at least two weeks before the payment date.**

**Only one skip permitted annually.**

**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