



## VAU OPT-OUT

I do not wish to participate in the VAU (Visa Account Update) service.

Cardholder Number: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

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

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

*Please return completed form to any one of our branch offices.*

OR

*Mail to:*

*The First National Bank & Trust Company of Newtown  
40 South State Street  
Newtown, PA 18940  
ATTN: EFT Department*