



*We care for you as you care for others.*

# Hartford Healthcare Federal Credit Union

## Dormant Account Reactivation Form

Please Reactivate My HHFCU Dormant Account # \_\_\_\_\_

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

Street: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Work Phone #: \_\_\_\_\_ Employer: \_\_\_\_\_

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

Please deliver the form to our Member Service Department at any HHFCU branch or FAX the form:860-527-6111.

Hartford Healthcare Federal Credit Union

4 Wethersfield Avenue

Hartford, CT 06114

860-547-0027