

Electronic Disclosure Agreement

Date: [Insert Date]

Account Holder Name: [Insert Name]

Account Number: [Insert Account Number]

Dear [Account Holder Name],

We are pleased to offer you the option to receive important disclosures and communication regarding your credit card account electronically. This agreement outlines your rights and responsibilities regarding electronic communications.

1. Scope of Communications

By agreeing to this Electronic Disclosure Agreement, you consent to receive all communications related to your credit card account electronically, including statements, policies, and notices.

2. Consent to Electronic Disclosures

You agree that all electronic communications provided to you satisfy any legal requirements for such communications to be in writing.

3. Withdrawal of Consent

You have the right to withdraw your consent to receive electronic disclosures at any time by contacting customer service at [Insert Customer Service Contact Information]. Upon withdrawal, paper copies of disclosures will be sent to your address on file.

4. Requirements for Access

To access electronic disclosures, you must have access to a computer or mobile device with an internet connection and a web browser. You may also need software to view PDF documents (e.g., Adobe Reader).

5. Acknowledgment

By clicking the 'I Agree' button below, you acknowledge that you have read and understood the terms of this Electronic Disclosure Agreement and agree to receive electronic communications.

I Agree

If you have any questions regarding this agreement, please feel free to contact us.

Sincerely,

[Your Company Name]

[Your Contact Information]