



Office Use Only	
Signature:	_____
Entered:	_____
Flag:	_____
Operator:	_____

SECURITY QUESTION FORM

EACH account holder / authorized signor on your account(s) will need to complete a form.
This form may be photocopied and is also available for download on our website: www.wifonline.com.

Name(s) on Account _____

Account #(s) _____

(If you have multiple accounts, please list each account number. For new accounts leave blank.)

PLEASE PROVIDE ANSWERS TO THREE OF THE FOLLOWING QUESTIONS

One or more of these will be asked each time you call our office. This will provide an added level of security and protection as we verify your identity.

Question	Answer
What city were you born in?	_____
What is your Mother's maiden name?	_____
What is your Father's middle name?	_____
What is your favorite hobby?	_____
What is the name of the High School you graduated from?	_____
What was the name of your first pet?	_____
What is your favorite color?	_____
What was the make of your first car?	_____

Account Holder Printed Name _____

Account Holder Signature* _____

Date _____

****This form is not valid unless signed.***