

# CINFED MEMBER REFERRAL FORM

## HOW TO GET \$50 FOR REFERRING A FRIEND

### In Just 3 Simple Steps!

1. Complete the form below and email it to [myreferral@cinfed.com](mailto:myreferral@cinfed.com).
2. **Tell your friend:** share why you love Cinfed and tell them about our special offer at [cinfed.com/myreferral](http://cinfed.com/myreferral).
3. When your friend qualifies, **we'll deposit \$50 into your account!**

#### YOUR INFO

\*First Name \_\_\_\_\_

\*Last Name \_\_\_\_\_

\*Email \_\_\_\_\_

\*Phone Number \_\_\_\_\_

\*Last 4 Digits of Cinfed Account \_\_\_\_\_

#### PREFERRED BRANCH

Colerain

Eastgate

Florence

Fort Wright

Oakley

Roselawn

Western Hills

#### YOUR FRIEND

\*First Name \_\_\_\_\_

\*Last Name \_\_\_\_\_

\*Email \_\_\_\_\_

Phone Number \_\_\_\_\_

\* = Required

By submitting this form, I acknowledge that my name and status as a Cinfed Member may be shared with my referral. See [Cinfed.com/myreferral](http://Cinfed.com/myreferral) for complete program details, disclosures and more. Individuals who are referred must be at least 18 years of age. Individuals may be contacted for additional information. When your referral qualifies, we'll deposit \$50 into your account. You will be notified by email of the qualification in approximately 60 days. If member does not qualify within the 60 days, they must resubmit their referral.