SPECIALIZED
TRUST COMPANY

SMS Enrollment & Cancellation Form

IMPORTANT INFORMATION

Use this form to enroll in or to opt out of receiving text messages from Specialized Trust Company. Send your completed form to help@IRASTC.com.

PART 1: EXISTING ACCOUNT OWNER INFORMATION

NAME *FIRST/MI/LAST*	**PRIMARY CONTACT NUMBER**	**EMAIL**

PART 2: SMS ENROLLMENT

MOBILE PHONE NUMBER 1

MOBILE PHONE NUMBER 2

MOBILE PHONE NUMBER 3

☐ **Check here to enroll in SMS messaging from Specialized Trust Company**

By enrolling in SMS messaging you agree to receive recurring messages from Specialized Trust Company, Reply STOP to opt-out. Reply HELP for help. Message frequency varies. Message and data rates may apply. Your consent is not a condition of any purchase or an account establishment.

PART 3: SMS CANCELLATION

MOBILE PHONE NUMBER 1

MOBILE PHONE NUMBER 2

MOBILE PHONE NUMBER 3

☐ **Check here to opt-out of SMS messaging from Specialized Trust Company**

PART 4: ACKNOWLEDGEMENTS AND SIGNATURE

Physical signature required unless submitted through an Adobe Sign envelope for audit purposes no exception.

Please provide a copy of your original, ink signature or Adobe Sign. If you choose Adobe Sign, we require a copy of the Signature Summary to be provided. Other forms of digital signatures are not currently accepted. By signing this form as the account holder, you authorize Specialized Trust Company to enroll your mobile phone number in SMS messaging.

SIGNATURE OF ACCOUNT OWNER	**DATE**
X	

**STAMPS, COPY & PASTE, OR NON-ADOBE SIGN SIGNATURES NOT ACCEPTED*