

Application for CCU ATM or Visa Check Card

Name _____

Address _____

Years There _____

Home Phone _____

Cell Phone _____

Email _____

Date of Birth _____

Date _____

Employment Information

Employed by _____

Current Income _____

Date Hired _____

Address _____

Business Phone _____

Account # _____

Number of Cards Requested _____

I/We hereby apply for a CCU ATM or Visa Check Card. By using the CCU ATM or Visa Check Card issued by the Credit Union upon approval of this application, I/we signify our Agreement to be bound by the terms of the Electronic Funds Transfer and Cardholder Agreement attached.

You authorize Community Credit Union to obtain credit reports in connection with this application for an ATM or Visa Check Card.

Account Owner _____

Social Security Number _____

Mother's Maiden Name _____

Joint Owner _____

Social Security Number _____

Mother's Maiden Name _____

In order to issue a card to either signer of a joint account, both owners must sign.

A checking account is required to be eligible for a Visa Check Card.