USSCO Federal Credit Union Check Card Application

Please check 1: [ ] New Applicant [ ] Adding Joint Owner

Replacement
Card for: [ ] Name Change [ ] Damaged Card [ ] Lost or Stolen Card

Member Identification # _____ Primary Phone _____

The checking account number provided is the account your USSCO Visa Check Card will access when making purchases and using ATMs.

Your Name _____ Social Security # _____

Address _____

City _____ State _____ Zip _____

Joint Owners Name _____ Social Security # _____

IMPORTANT INFORMATION – PLEASE READ

In order to activate your new card and select your own PIN, you must use the Social Security Number of the primary account holder and you must call from the primary telephone number on record with the Credit Union.

Please verify the telephone number on our records.

Please read before signing: I (We) authorize the credit union to verify or obtain further information the credit union may deem necessary concerning my (our) credit history. If this application is approved and a USSCO Visa Check Card is issued, the undersigned applicants(s), by signing, using or permitting another to use the USSCO VISA Check Card agree to be bound by the terms and conditions accompanying the USSCO VISA Check Card and all amendments. The undersign hereby acknowledges that the signing, using or permitting another to use the USSCO VISA Check Card represents an acknowledgement of the USSCO VISA Check Card Agreement and all amendments and further represents the acceptance of the terms and conditions of the USSCO VISA Check Card Agreement and all amendments.

New Checking Accounts must be opened a minimum of 1 month and be in good standing with an account balance before cards are ordered.

_____

Your Signature Date

_____

Joint Owners Signature Date

Revised 11/2011

USSCO Federal Credit Union Since 1958

Check Card Application