

# Visa Check Card Application

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Use this application to apply for a First Choice Financial Federal Credit Union Visa Check Card. IN ORDER TO ISSUE A PERSONALIZED, INDIVIDUAL CARD TO EITHER OWNER OF A JOINT ACCOUNT, EACH OWNER MUST FILL OUT A SEPARATE APPLICATION.

Cardholder \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_ D.O.B. \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

**I wish to access this account for Check Card and ATM use:**

Account# \_\_\_\_\_

**Authorization:** By signing below, I am applying for a First Choice Financial Federal Credit Union Visa Check Card. I understand that this is not a credit card and that the dollar amount of the purchases made with this card will deduct from my First Choice Financial Federal Credit Union checking/savings account. I authorize First Choice Financial Federal Credit Union to verify the information provided above and to request a credit report if necessary. The First Choice Financial Federal Credit Union Visa Check Card is available for qualified members only. Other requirements apply. I agree to the terms and conditions covered in the appropriate Electronic Funds Transfers Agreement and Disclosure.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Employee initials taking information: \_\_\_\_\_ Date: \_\_\_\_\_

## FINANCE DEPT. USE ONLY

Date Ordered: \_\_\_\_\_

Employee initials: \_\_\_\_\_

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