

VISA DEBIT CARD APPLICATION

Received By _____ Ordered By _____ Date___

Please complete and submit this application to any CSE branch location or mail to the address listed above. Retain attached Regulation E Disclosure and VISA Debit Cardholder Agreement for your records. For a joint owner to receive a Card, he/she must be a joint owner on both the share and share draft accounts.

MEMBER INFORMATION
Member Name:
Member Number:
Date of Birth.
Date of Birth:
Address:
Home Phone:
Cell Phone:
REQUEST FOR ADDITIONAL CARD(S) FOR JOINT OWNER
I request a VISA Debit Card for the following joint owner:
Joint Owner Name:
Date of Birth:
Address:
Home Phone:
Cell Phone:
ACKNOWLEDGMENT CERTIFICATION CONTROL OF CONT
Please send me, and any joint owner listed above, a CSE Credit Union VISA Debit Card. I have read the attached disclosure in compliance with Regulation E and agree to all terms and conditions of the cardholder agreement.
I understand that point-of-sale (POS) transactions can only be made from my share draft (checking) account.
X
Primary Owner Signature Date
X
Joint Owner Signature Date