IBEW 26 FCU Visa Check Card Application

Primary Member Information	Joint Owner Information
Account Number	
Name	Name
Address	Address
City, State, Zip Code	City, State, Zip Code
Home Phone	Home Phone
Day Phone	Day Phone
Email Address	Email Address
Social Security Number	Social Security Number
Is this a new or replacement card? New Replacement	
Reason for replacement Lost Stolen Damaged  (there may be a replacement charge of \$15.00)  Check here for PIN replacement	
By signing below, you certify that the information on this application is complete, true, and submitted for the purpose of obtaining the electronic service(s) and account(s) requested. You agree: (a) that the Credit Union can use credit reporting agencies or otherwise verify the information on the Application for the purpose of extending credit or services to you or reviewing or collecting on a loan account of yours; (b) that the Credit Union can tell others about its credit experience with you and obtain information from others about your credit history and performance. If you request, the Credit Union will tell you the name and address of any credit reporting agency from which it received a credit report on you. If your request is approved, your Check Card will be mailed to the address on file in approximately two weeks. Since your IBEW 26 FCU Check Card can be used at merchant and ATM locations you will no longer need your IBEW 26 FCU ATM Card. Therefore, your ATM card will be deactivated 45 days from the date your IBEW 26 FCU Check Card is issued. Once you activate your Check Card please destroy your ATM card.	
When you receive your Check Card, you will also receive a copy of the agreement explaining your rights and responsibilities as a cardholder. Please read the agreement carefully as soon as you receive it. Acceptance, retention or use of the card will constitute your concurrence with the terms of the agreement.	
Signature Joint Signature	Date