

Request for Authorized Visa Card User

Form may be returned by fax to (925) 609-5159

Please provide a legible copy of current driver's license for both the member and the additional card user.

I request that an additional card be issued on my Pacific Service CU Visa card.

Member Name	Account Number	Visa Card Number
() Home Phone Number	() Work Phone Number	Cell Phone Number
New User Information		
Relationship to Member	pouse 🛛 Relative 🖓 Other _	
Name	Driver's License Number	Birth Date
() Home Phone Number	() Work Phone Number	Cell Phone Number
Signature	Social Security Number	Date

By signing below and requesting an additional Visa card, you are designating the person named above as an authorized user of your Pacific Service CU Visa Account. The additional card(s) will be embossed with the additional cardholder's name(s). You agree to repay us according to the terms of the Visa Card Agreement and Federal Truth in Lending Disclosure for all purchases, advances, finance charges, late charges, collection costs and or any additional fees, arising from the use of the account by you or any other person you permit to use the account, even if that person exceeded the amount for which you gave permission. Please refer your Pacific Service CU Visa Member Agreement and Disclosure Statement for additional information.

Member Signature

Date