

Please complete form. Mail, fax, or return it to one of our convenient branch locations.

FAX (832) 615-4096

Application

This application can be used for United Community Credit Union Debit Card. IN ORDER TO ISSUE A PERSONALIZED, INDIVIDUAL CARD TO EITHER SIGNER OF A JOINT ACCOUNT, EACH OWNER MUST FILL OUT A SEPARATE APPLICATION.

Please print clearly.

Member _____ Soc. Sec.# _____

Address _____

City _____ State _____ Zip _____

Telephone (Day) _____ (Evening) _____

I wish to access this account for Debit Card use:

Checking Account#: _____

Savings Account#: _____

Authorizations: By signing below, I am applying for a United Community Credit Union Debit Card. I understand this is not a credit card and the dollar amount of the purchases made with this card will be deducted from my United Community Credit Union checking account only. I authorize United Community Credit Union to verify the information provided above and to request a credit report if necessary. The United Community Credit Union Debit Card is available for qualified customers only. Other requirements may apply. I agree to be bound by the terms and conditions covered in the United Community Credit Union Card Agreement.

Signature _____ Date _____

FOR CREDIT UNION USE ONLY: Card# _____

Date Approved _____ By _____

Date Ordered _____ By: _____ Verified By _____

Personal Identification Number (PIN)

Your PIN will be mailed to you separately from your Debit Card. You may use this PIN or you may choose your own PIN. To choose your own PIN, you may change your PIN at one of our United Community Credit Union ATMs after the initial activation of your card.