



Improving the Lives of Our Members... One Member at a Time

Visa® Check Card Application

You must have a checking account with Connex Credit Union to obtain a Visa® Check Card.

Connex Credit Union Checking Account #	
Primary Member (1)	
Social Security #	
Joint Owner (2) (Complete only if both members would like a Visa® Check Card)	
Joint Owner Social Security #	
Address	
Home Phone	Work Phone
Birth Date (1)	Birth Date (2)
Mother's Maiden Name (1)	
Mother's Maiden Name (2)	

Authorization:

I (we) are applying for a Connex Credit Union Visa® Check Card. I (we) understand that this is not a credit card and that the dollar amount of purchases made with this card will be deducted from the Connex Credit Union Checking Account noted above. By signing below, I (we) authorize Connex Credit Union to verify the information which has been provided and to request a credit report in connection with this application and future renewals of my (our) Visa® Check Card. I (we) understand that the Visa® Check Card is available for qualified customers only and other requirements apply. If I (we) are approved for the Visa® Check Card, this/these card(s) will be sent directly to the mailing address. A notification letter will be sent out if I (we) are not approved.

Member Signature (1): _____	Date: _____
Signature (2): _____	Date: _____

Note: Your Visa® Check Card and disclosures will be mailed to you.