

"Debit Card" Order Form

Please order a Los Angeles Federal Credit Union (LAFCU) DEBIT CARD as follows:

Account Number: _____

DEBIT CARD Number: _____

Applicant Name

Driver's License Number

Co-Applicant's Name

Driver's License Number

Address

City

State

Zip

Work Phone

Home Phone

Home Email

The applicant and co-applicant authorize investigation of their creditworthiness and the renewal of any card(s) issued. Card(s) will be issued upon approval of this application. The disclosure statement explaining your rights and responsibilities as a DEBIT CARD cardholder will be provided with each new card(s) application. By signing this application, you acknowledge receipt of the disclosure and understand your responsibilities as stated in the disclosure agreement.

Applicant's Signature

Date

Co-Applicant's Signature

Date

CREDIT UNION USE ONLY:

Application Verified by: _____ Teller #: _____ Date: _____

Approved by: _____ Teller #: _____ Date: _____

FOR ELECTRONIC SERVICES USE ONLY:

Processed by: _____

Date Card(s) Ordered: _____

Number of Card(s) Issued: _____

Applicant: _____
(Debit Card Number)

Co-Applicant: _____
(Debit Card Number)



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