



MEMBER Account#	Credit Limit Requested	No. of Cards
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NOTICE: Married Applicants may apply for a separate account. Check the appropriate box below to indicate the type of credit for which you are applying.
 Individual Credit: Complete Applicant section. **Joint Credit:** Provide information about both of you by completing Applicant and Co-Borrower sections.

TELL US ABOUT YOURSELF					
Last Name	First	Middle	Social Security #		
Street Address	Apt. #	City	State	Zip	Birth Date
Employer	Employer Address				Start Date
Position	Notice: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered. Other Source: _____ \$ _____ Per _____				<input type="checkbox"/> Gross Monthly Income <input type="checkbox"/> Net Monthly Income \$ _____
Work Phone ()	Home Phone ()		Mother's Maiden Name		
Work E-mail Address	Home E-mail Address		Credit Life Insurance <input type="checkbox"/> Yes <input type="checkbox"/> No		

TELL US ABOUT YOUR CO-BORROWER (COMPLETE FOR JOINT CREDIT)					
Last Name	First	Middle	Social Security #		
Street Address	Apt. #	City	State	Zip	Birth Date
Employer	Employer Address				Start Date
Position	Notice: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered. Other Source: _____ \$ _____ Per _____				<input type="checkbox"/> Gross Monthly Income <input type="checkbox"/> Net Monthly Income \$ _____
Work Phone ()	Home Phone ()		Mother's Maiden Name		
Work E-mail Address	Home E-mail Address		Credit Life Insurance <input type="checkbox"/> Yes <input type="checkbox"/> No		

FINANCIAL AND PERSONAL INFORMATION					
Name of Financial Institution (Address)	<input type="checkbox"/> Savings	<input type="checkbox"/> Checking			
Credit Reference/Type	Company Name	Account #	Monthly Payment	Balance	
Credit Reference/Type	Company Name	Account #	Monthly Payment	Balance	
Home: <input type="checkbox"/> Own <input type="checkbox"/> Rent	Monthly Payment _____	Mortgage Holder or Landlord _____			
Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever filed for bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes		Year _____		
Are you a bearer on any other loan? <input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, Explain _____				
Personal Reference	Address	Phone	Relationship		

PLEASE SIGN HERE (BOTH SIGNATURES REQUIRED FOR JOINT CREDIT)	
A consumer credit report may be requested in connection with this application and with any renewals, updates or extensions of any new credit extended as a result of this application. The Credit Union is relying on what you stated in this application and you acknowledge that everything you have stated is true. If a credit card issued to you and you use the card (or its account number) or authorize its use, you agree that such use will constitute your agreement to the terms of the cardholder agreement that you receive from the credit union.	
X	DATE
APPLICANT'S SIGNATURE	
X	DATE
CO-BORROWER'S SIGNATURE	

ANNUAL PERCENTAGE RATE (APR) for purchases	Visa Classic - 14%
Cycle period for repayment of the balance for purchases	25 days
Method of computing the balance for purchases.	Average Daily Balance (Including new purchases)
Transaction fee for purchases	NONE
Annual Fee	\$15.00 (Classic)
Other Fees Transaction Fee for Cash Advances..... NONE Over-Credit-Limit-Fee \$15.00 Late Payment Fee \$15.00 (Classic)	

FOR CREDIT UNION USE ONLY	
<input type="checkbox"/> Approved <input type="checkbox"/> Declined	Credit Limit _____
Credit Card Account # _____	
Official Signature _____	

NAME: _____

ACCOUNT NO: _____

Please draw a map to your residence below:

TYPE OF BUILDING: Full concrete Frame, tin roof / side
 Semi - Concrete Wooden house / tin roofing

COLOR: _____ HOUSE NO: _____

STREET NAME: _____

VILLAGE: _____

LANDMARKS: (Example: Church, Shopping Center, School, etc.) _____

