



Boulder Dam Credit Union
 P.O. Box 61530
 Boulder City, NV 89006-1530
 (702) 293-7777

ATM CARD APPLICATION

If card is for Joint Owner ONLY, check here

Please let computer assign PIN

MEMBER NUMBER _____

Number of Cards Requested _____

MEMBER INFORMATION			JOINT OWNER INFORMATION		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP	CITY	STATE	ZIP
SOCIAL SECURITY NUMBER			SOCIAL SECURITY NUMBER		
BIRTHDATE			BIRTHDATE		
MOTHER'S MAIDEN NAME (LAST NAME)			MOTHER'S MAIDEN NAME (LAST NAME)		
HOME PHONE ()	CELL PHONE ()		HOME PHONE ()	CELL PHONE ()	
EMPLOYER	WORK PHONE ()		EMPLOYER	WORK PHONE ()	

I understand that by signing this application, a credit report may be obtained to determine if I am eligible for an ATM card. There may be fees incurred by using the ATM card. The exact fees are reported in the information you received upon opening your account or may be obtained upon request from the ATM department.

Minimum age to obtain an ATM card is 14 years old. Anyone under 18 must have parental approval to obtain a card.

I agree to keep my ATM card in my personal possession and to protect my Personal Identification Number (PIN). Boulder Dam Credit Union reserves the right to revoke the use of this card at their discretion.

X _____
 Member Signature

X _____
 Joint Owner Signature

_____/_____/_____
 Date

_____/_____/_____
 Date

X _____
 Parent or Guardian Authorization
 if Member is Under 18 Years Old

 Print Name Relationship to Member

FOR CREDIT UNION USE

Ordered _____

Letter _____

AEF _____ Co-Op _____

Audited _____

ONLINE \$ _____

LETTER \$ _____

APPROVED: _____ EXP. DATE _____

DENIED: _____

REASON _____
