

**A+** ACCESS

ATM/VISA Check Card Application

\_\_\_\_\_  
Base Account Number

*A SHARE AND SHARE DRAFT ACCOUNT ARE REQUIRED FOR CARD APPROVAL!*

\_\_\_\_\_  
Member Name (Last, First, Middle Initial)

\_\_\_\_\_  
Social Security Number or UIN

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Driver's License Number State

\_\_\_\_\_  
Street Address City State Zip Code

(\_\_\_\_\_)\_\_\_\_\_  
Home Telephone Number

(\_\_\_\_\_)\_\_\_\_\_  
Work Telephone Number

**IN ORDER FOR A JOINT MEMBER TO BE ELIGIBLE FOR A DEBIT CARD, HE/SHE MUST BE JOINT ON BOTH SHARE AND SHARE DRAFT ACCOUNTS.**

\_\_\_\_\_  
Joint Member Name (Last, First, Middle Initial)

\_\_\_\_\_  
Social Security Number or UIN

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Driver's License Number State

I understand that upon Credit Union approval , my A+ ACCESS card and my Personal Identification will be forwarded to me. I understand the PIN will be mailed separately from the card.

I (we) authorize Sangamon Schools Credit Union to obtain credit information in connection with this application. I (we) agree to surrender card(s) upon demand.

\_\_\_\_\_  
Member Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Joint Member Signature

\_\_\_\_\_  
Date

OFFICE USE ONLY	Check List Complete <input type="checkbox"/>	Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	Card Ordered <input type="checkbox"/>
_____ CU Representative	_____ Date	_____ CU Officer	_____ Date	
_____ Ordered By	_____ Date			