



Add/Delete Visa® Platinum Card Authorized User

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PRIMARY CARDHOLDER INFORMATION

PRIMARY CARDHOLDER NAME [PLEASE PRINT]	EMAIL ADDRESS		
STREET ADDRESS	CITY	STATE	ZIP
VISA ACCOUNT NUMBER	SOCIAL SECURITY NUMBER		

SECONDARY AUTHORIZED USER INFORMATION

AUTHORIZED USER NAME [PLEASE PRINT]	
DATE OF BIRTH	SOCIAL SECURITY NUMBER

ACTION

Add Authorized User named above and issue him/her an additional card

Delete Authorized User named above

I hereby request that the credit union take the action indicated above. I understand that I will be responsible for all charges incurred by all Authorized Users.

 PRIMARY CARDHOLDER SIGNATURE

 DATE

 PRIMARY CARDHOLDER'S PHONE NUMBER

CREDIT UNION USE ONLY

Card Processed Ordered by: _____

Date _____

Evolve Updated by: _____

Date Verified by: _____

Date _____