

PowerPlus VISA Check Card Application

Enrollment Instructions — *Be sure to keep a copy of the completed form for your records*

1. Complete all REQUIRED spaces on this form
2. Reg E and PowerPlus Disclosures will be mailed
3. Sign the form

4. Fax or Mail signed form to LCRA Credit Union
 --Fax To: 512-469-6808 or 512-469-6864
 --Mail To: P.O. Box 5310, Austin TX 78763

REQUIRED - All Blanks in this area must be completed or your request will be delayed

Member Account Number:		Social Security Number:	
Checking Account Type (Circle One): 75 76 77 78		Date of Birth:	
First Name:	M.I.:	Last Name:	
<i>(If you provide an address that is different than the one we have on file, it will be verified before PowerPlus access is allowed)</i>			
Street Address:			
City:	State:	Zip:	
Mailing Address: (if different from street address)			
City:	State:	Zip:	
Home Phone:	Work Phone:	Cell Phone:	

Primary Member's Signature: _____ Date: _____

(Signature will be verified with membership card on file before PowerPlus access is allowed)

ADDITIONAL CARD FOR JOINT OWNER ONLY	
\$5.00 per additional card –CARD NUMBER AND PIN WILL BE DIFFERENT	
REPLACEMENT CARD – \$10.00 per card replaced –CARD NUMBER AND PIN WILL BE DIFFERENT	
<i>(FEE WILL BE CHARGED TO CHECKING ACCOUNT)</i>	
Name on Card:	Date of Birth:
Social Security Number:	
Primary Member's Signature: _____	Date: _____

Upon receipt of this completed and signed form, the credit union will verify address changes, verify your signature and verify joint owners on additional cards requested. When verifications are complete, the credit union will order your PowerPlus VISA Check Card. Your PowerPlus VISA Check Card will be mailed to you at the address on file. A PIN will be mailed to you separately and arrive a few days after your card. You will need to ACTIVATE your card before it can be used for all transactions. To activate, take your card to an ATM machine and perform a transaction using your PIN. **There is a \$1.00 fee to activate the card.**

FOR CREDIT UNION USE ONLY

Completed by: _____ Date: _____ Other LCRA Credit Union Accounts

Signature Verified: _____ Address Verified: _____ Joint Verified: _____ Member 188: _____
 183: _____

Current Checking: Yes No Chexsystems (new accounts only): _____ Joint 183: _____

Check NSF's 246 _____ # ACH NSF's 289 _____ 188: _____

Processed: CWS: _____ 103: _____ Letter Mailed: _____ Charge for Replacement/Joint Owner Card: _____

CARD NUMBER: 4 7 6 7 2 8 _____

CARD NUMBER/ADDITIONAL CARD: 4 7 6 7 2 8 _____