



GTFCU Visa Check Card/ATM Card Order Form

Fax application to 512-323-4880

Non-U.S. residents living outside the U.S. may not qualify for a GTFCU Check Card

Choose One

New Card Order Replacement Card (\$5 replacement card fee may apply)

Reason for Replacement _____

Choose One

I wish to choose my own PIN# in person or via phone during card activation.

I wish the Credit Union to issue a random PIN# to me via mail.

(Please Select)

GTFCU VISA CHECK CARD

AGGIELAND VISA CHECK CARD

REGULAR ATM CARD

Account Number _____

Cardholder name to appear on the card _____

PLEASE MAIL MY CARD TO:
(branch delivery not available)

Address _____

City _____ State _____ Zip _____

Is this your mailing address? YES NO (There will be a \$15 fee for mailing to an alternate address)

(please allow 5 to 7 business days for delivery)

The applicant signing below requests, subject to the approval of Greater Texas Federal Credit Union/Aggieland CU (GTFCU), a card and personal identification number (PIN) to be used to access the card. By signing, applicant agrees to the delivery time stated above. By using the card, the applicant agrees to abide by the terms and conditions of the GTFCU ATM and Visa Check Card agreement and Disclosure which will accompany the card. Further, the applicant will take precautions to protect the card and PIN from unauthorized usage. By requesting a card mailer to an alternate address, the applicant agrees that the existing GTFCU savings/checking account mailing address will be altered for a period of 3 to 5 business days to reflect the alternate mailing address on this form; the applicant agrees to receive all other mail from GTFCU (including statements) at this alternate address for a period of 3 to 5 business days or until the card is delivered.

Member Signature _____ Date _____

Sent/Faxed by _____ Ordered by _____ Date Ordered _____ Fee? _____