



Instant Issue Card Application

FAX BACK TO 512-323-4880

In Person---\$10.00 2-Day Air---\$15.00 Next-Day Air---\$35.00

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

Name: _____

Account # _____ Reason for Replacement _____

Type of card requested (check one)

GTFCU Visa Check Card

AGGIE Visa Check Card

Regular ATM card

Type of PIN # requested (please check one)

PIN # set by me during activation

Mail me a RANDOM PIN #

Type of delivery requested (check one)

In person at branch

UPS Standard 2-day \$15

UPS Next-day Rush \$35

Request must be received by 1pm

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Saturday Delivery available for an additional fee

**Please mail/rush my card to:
(PO BOXES OR BRANCH DELIVERY NOT ACCEPTED)**

Address: _____

City: _____

State: _____ Zip: _____

Is this your home address? YES NO

By signing below the applicant agrees to abide by the terms of the cardholder agreement located on the back of the card carrier. The applicant agrees to take the necessary precautions to protect the card and PIN from unauthorized usage. By signing below, applicant agrees to the instant issue/delivery fee as determined by our board of directors.

Member signature _____ **Date** _____

For credit union use only

Last 6 digits of card _____

Employee op# _____ Date: _____