

# CHECK CARD APPLICATION

If card is for Joint Owner ONLY, check here



Boulder Dam Credit Union  
 P.O. Box 61530  
 Boulder City, NV 89006-1530  
 (702) 293-7777

MEMBER NUMBER \_\_\_\_\_

Number of Cards Requested \_\_\_\_\_

MEMBER INFORMATION		JOINT OWNER INFORMATION	
NAME		NAME	
MAILING ADDRESS		MAILING ADDRESS	
CITY	STATE ZIP	CITY	STATE ZIP
SOCIAL SECURITY NUMBER		SOCIAL SECURITY NUMBER	
BIRTHDATE		BIRTHDATE	
MOTHER'S MAIDEN NAME (Last Name)		MOTHER'S MAIDEN NAME (Last Name)	
E-MAIL ADDRESS		E-MAIL ADDRESS	
HOME PHONE ( )	CELL PHONE ( )	HOME PHONE ( )	CELL PHONE ( )
EMPLOYER	WORK PHONE ( )	EMPLOYER	WORK PHONE ( )

This information is given to obtain the Boulder Dam Credit Union Check Card and is true and complete. Boulder Dam Credit Union may verify the information given and obtain further information from a consumer credit report to assist in the review process. Boulder Dam Credit Union may withdraw this offer if unable to verify the information I provide, or if a current report reflects certain adverse circumstances. When I or someone I authorize use(s) the Boulder Dam Credit Union Check Card, I agree to the terms and conditions of the agreement that governs the use of the Boulder Dam Credit Union Check Card. I understand Boulder Dam Credit Union may assess service charges for the privilege of having and using (a/an) Boulder Dam Credit Union Check Card as listed in the Agreement and Disclosure for Boulder Dam Credit Union Check Card. You and any co-applicant must be at least 18 years of age to accept this offer.

X \_\_\_\_\_ /\_\_\_\_\_/\_\_\_\_\_  
 Member's Signature Date

X \_\_\_\_\_ /\_\_\_\_\_/\_\_\_\_\_  
 Co-Owner's Signature Date

Ordered \_\_\_\_\_ ONLINE \$ \_\_\_\_\_ APPROVED: \_\_\_\_\_ EXP DATE \_\_\_\_\_  
 Letter \_\_\_\_\_ POS \$ \_\_\_\_\_ DENIED: \_\_\_\_\_  
 Co-Op \_\_\_\_\_ REASON \_\_\_\_\_  
 Audited \_\_\_\_\_ OFFLINE \$ \_\_\_\_\_