

Application for a Visa Debit Card

Applicant name: Email Phone Mobile **Important privacy information**

By completing this form you give us personal information. By signing it you acknowledge that you have received and had the opportunity to read our Privacy Statement which contains important information about our management of personal information. For more information, see our Privacy Policy which is available on request or on our website.

Applicants employment details:Employer's name Years at current employer Net monthly income Other sources of income Is your income credited to an account you have with us? Yes NoAccount from which the Visa facility will operate [Employment confirmed and Visa Card approved](#)**Declaration**

I/We, the undersigned apply for a Visa Debit card and submit the above particulars and state that these particulars are true, complete and correct. These particulars have been given to the Credit Union to enable it to decide whether or not to issue me/us a Visa Debit card.

I/We acknowledge that the Credit Union will rely upon these particulars when making its decision. I/We declare that I am/we are not undischarged bankrupts and that there are no outstanding judgements or claims against me/us.

I/We acknowledge and agree that my/our signature on this form signifies receipt and acceptance of the appropriate product information, terms and conditions, and fees and charges documents which form part of this application.

I/We understand that the use of the Visa Debit card by any additional signatory will be deemed to be the same as if I/we had used it personally and will bind me/us accordingly.

Name Member no Signature Date Operator ID