



Address: 1888 Wili Pa Loop, Wailuku, HI 96793 * Tel: 808-244-7968 * Web: www.MauiCountyFCU.org

VISA CHECK CARD APPLICATION

Account Number

Member Name Social Security Number Date of Birth

Home Address City State/Zip

Mailing Address (If different from home address) City State/Zip

Home Phone Work Phone Mother's Maiden Name

Employer Position Years on this job

JOINT OWNER

Joint Owner Social Security Number Date of Birth

Home Address City State/Zip

Mailing Address (If different from home address) City State/Zip

Home Phone Work Phone Mother's Maiden Name

Employer Position Years on this job

By completing this application and signing below, you certify that the information on this application is correct to the best of your knowledge and authorize Maui County Federal Credit Union to check your account history. When approved, you acknowledge receipt of, and agree to, the terms of the Electronic Funds Transfer Agreement.

Member's Signature Date

Joint Owner's Signature Date

FOR CREDIT UNION USE ONLY

Date Received by

Share Draft Open Date Date Card Ordered

VISA Check Card Number(s) Ordered by