



ATM/Debit Card Application & Replacement

Student Organization Account

All applications are subject to approval. An OU Federal Credit Union share draft account is required for purchase of goods or services. By my signature, I request the OUFCU VISA® ATM/Debit Card. I have been instructed to memorize my PIN number, never write it on the card, and never tell anyone my PIN except people who are authorized to sign on the account, and even then disclosure is at my discretion. I have also received and read the liability disclosures concerning the use of the card.

Account # _____ New Card: Replacement:

Organization Name (Limited to 18 spaces)

Ship to: Lindsey location: Student Union location: Instant Issue (\$2):

OR

Address

City

State

Zip

Primary Contact's Phone #: _____

Secondary Contact's Phone #: _____

Advisor's Signature: _____ Date _____

For OUFCU Use Only

Received By

Date

Ordered By

Card#

Date