



Add Authorized User to Credit Card

ACCOUNT OWNER:

Account #: _____

First Name M.I. Last Name

Street

City State Zip

Social Security # Date of Birth

AUTHORIZED USER:

First Name M.I. Last Name

Street

City State Zip

Social Security # Date of Birth

Cell Phone Number Email Address

Signature of Account Owner Date

By submitting this form, you represent that the person you've identified as your Authorized User has agreed to be an Authorized User on your Advanced Financial Federal Credit Union account.

As the primary account holder, you are responsible for all charges made by your Authorized User(s). When you request to add a user to your account, you are confirming that all the information you provided is correct and that you are adding them for the purpose of making transactions on the account. If you provide inaccurate information or you are not adding them to use the account, we can close your account.

Advanced Financial Federal Credit Union reports account status and information to credit bureaus as to all account users.