



Card Application

Membership Number

This card remains property of Capricornia Credit Union Ltd and must be returned on request.

Link Card To:

Date: / /20

Member Name:

Contact Details:

Residential Address:

Postal Address:

Daytime Phone: After Hours Phone: Fax:

Mobile: Email:

Information Required:

Please Order: Visa Cuecard

Employer Details:

Full Time Casual Permanent Part-time

Years There: Years in previous employment:

Drivers License Number: Expiry Date:

Password: Password Hint:

Eg Mothers Maiden Name

I hereby apply for a Capricornia Credit Union Ltd card and Personal Identification Number (PIN). I acknowledge that I have received a copy of the Cuecard or Visa conditions of use and information pertaining to the use of the card and Personal Identification Number (PIN). I understand that my use of the card signifies my understanding and acceptance of the conditions of use as per Product Disclosure Statement Payment Services. I acknowledge that usage of my card may incur transaction fees in accordance with the Credit Union's current Schedule of Fees. I understand that an annual fee may apply to the application of this card.

Member Signature:

Office Use Only

Prosper
 CRAA

Visa

FSR Documentation
 Cuecard

PP Loaded

Exemption

No Annual Card Fee

Password loaded:

Authorised by:

Ordered by: