

EXTRA VISA CARD ORDER

Date: _____

I would like an additional VISA Credit Card issued in the name of

(PLEASE PRINT)

I would like to assume liability for, and agree to pay for, purchases and cash advances made through the use of this card.

Visa Account # _____

Signed: _____ Date _____

Additional information needed:

Primary social security number: _____

Primary street address: _____

Primary city, state & zip: _____

Non-primary social security number: _____

Non-primary date of birth: _____

(Y/N) _____ Should this non-primary cardholder name be the second name on the statement?

(Y/N) _____ Do you want your account reported on this authorized user's credit bureau report?

Misc. notes: