

ADD AUTHORIZED USER

An authorized user may only be added by the primary card holder

Please Print and Mail Form:
CU Campus Card Services
2201 S First St Champaign,
IL 61820

VISA account #: _____

Primary Name on account: _____

Name to be added: _____

Address (of authorized user): _____

City: _____

State: _____ Zip: _____

Phone # (of authorized user): _____

Email (of authorized user): _____

SSN (of authorized user): _____

Date of Birth (of authorized user): _____

By signing this form, you authorize the above individual to use your VISA account to make any and all transactions including in person, online, and other "card not present" purchases. You promise to pay for all credit purchases, cash advances and other transactions made by anyone designated on this form. If you desire to end that person's authorized user privilege, you must recover and return any cards issued in that individual's name as well as notify UICCU in writing.

Primary Account Owner

Date