



# VISA® CREDIT CARD ADD/REMOVE AUTHORIZED USER REQUEST

## MEMBER INFORMATION

Member Number	Member Share Account Number
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VISA® Credit Card Number
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## AUTHORIZED USER INFORMATION

Authorized User Name	Authorized User SSN	Authorized User Date of Birth
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Authorized User Street Address	City	State
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Zip	Phone Number	<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell
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- Add authorized user
- Remove authorized user name
- Please issue a VISA® Credit Card for the above named individual. I understand that I am fully responsible for all charges incurred using this VISA® Credit Card, including those charges made by the authorized user.
- I acknowledge and agree to the above terms and conditions.

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Authorized User Signature \_\_\_\_\_ Date \_\_\_\_\_

## FOR CREDIT UNION USE ONLY

<input type="checkbox"/> OFAC Scan Complete	Date
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Fax this completed form to 404-598-2586, or scan & email to [creditunion@coca-cola.com](mailto:creditunion@coca-cola.com) or deliver/mail to Credit Union office at the Coca-Cola Credit Union, PO Box 1734, Atlanta, GA 30301-1734.