

APPLICATION

Member's Name (Print)	
Account Number	
Home Number	_ Work or Cell Number
Email Address	

Check the card you want (choose one):

Visa[®] Debit Card (you must have a Dominion Energy CU Checking Account to apply for this card)

ATM Card (Dominion Energy CU Savings Account only)

Please read carefully:

By signing this application, I/we agree to the terms and conditions of the Dominion Energy Credit Union Visa Debit Card/ATM Card Disclosure, which is available at any Credit Union location or by calling the Credit Union Member Service Center at 800.268.MYCU.

Member's Signature _____

Date _____

Please also issue a card for the Joint Owner on my account. (A Joint Owner may apply for a card provided he or she is joint on the savings and checking accounts.)

Joint Owner's Name (Print) ______

Joint Owner's Signature _____

Date

Interoffice Address

Return to: **Dominion Energy Credit Union** PO Box 26646, Richmond, VA 23261-6646 Phone: 800-268-6928 • Fax: 804-521-2510 Email: mycu@dominionenergy.com Zix secure email: www.dominionenergycu.org/securemail VA-Credit Union Operations – Boulders You may also return the form via Secure Messaging by logging into Digital Banking