



**PLEASE ADD AN AUTHORIZED USER TO MY TRI COUNTY AREA
FEDERAL CREDIT UNION CREDIT CARD.**

DATE _____

MEMBER # _____

MEMBER NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE NUMBER _____

CREDIT CARD NUMBER _____

MEMBER ACCOUNT NUMBER _____

AUTHORIZED USER NAME _____

AUTHORIZED USER SOCIAL SECURITY NUMBER _____

AUTHORIZED USER DATE OF BIRTH _____

SIGNATURE OF MEMBER _____

COMPLETED DATE _____

COMPLETED BY _____