



Visa Debit Card Application

Primary Member Information

Name (First, MI, Last)

Checking Account Number

Signature

By signing below, you authorize Alaska Air Group Credit Union to verify your credit. You will receive my new EMV chip VISA Check Card(s) within two weeks of your application being approved. Acceptance, retention, or use of the VISA Check Card will constitute your concurrence with the terms of the agreement you will receive with my account disclosure.

Member Signature

Today's Date

Join Owner/Co-Applicant Information

Name (First, MI, Last)

Signature

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Member Signature

Today's Date