RAPIDES FEDERAL CREDIT UNION

612 Broadway Avenue Alexandria, LA 71302-5932 (318) 445-2866 Fax: (318) 448-1406 A table that includes required credit card disclosures is provided with this Application. To obtain any change in the required information since it was printed, call us at 318-445-2866.



Credit Card Application

Check below to indica	ate the type of cred	it for which you are a	pplying. Married A	applicants may	apply for a	separate account.		
(3) you are relying on	located in a community your spouse's income	y property state (AK, AZ, as a basis for repaymen	CA, ID, LA, NM, NV, T nt. If you are relving	X, WA, WÍ); (2) y on income from a	our spouse valimony, chil	will use the account; or		
maintenance, complete the Other section to the extent possible about the person on whose payments you are relying. Joint Credit: Each applicant must individually complete the appropriate section below. If Co-Borrower is spouse of the applicant, mark the								
Co-Applicant box. Guarantor: Complete the	Other section if you ar	re a guarantor on an acco	ount/loan. 🗆 C	redit Limit Reque				
Applicant			Other: Co-	Applicant :	Spouse	Guarantor		
NAME (Last - First - Initial)		ACCOUNT NUMBER	NAME (Last - First - Initial)			ACCOUNT NUMBER		
DRIVER'S LICENSE NUMBER / ST/	ATE SOCIAL SEC	URITY NUMBER	DRIVER'S LICENSE NUME	BER / STATE	SOCIAL SECU	RITY NUMBER		
E-MAIL ADDRESS	E-MAIL ADDRESS							
BIRTH DATE HOME PHONE BUSINESS PHONE/ EXT.			BIRTH DATE HOME PHONE BUSINESS PHONE/ EXT.					
()	()	()	()		
PRESENT ADDRESS (Street - City	- State - Zip)	OWN RENT YEARS AT THIS ADDRESS	PRESENT ADDRESS (Stre	eet - City - State - Zip)		OWN RENT YEARS AT THIS ADDRESS		
MORTGAGE/RENT OWED TO:			MORTGAGE/RENT OWED) TO:		1		
MORTGAGE BALANCE M	ONTHLY PAYMENT	INTEREST RATE	MORTGAGE BALANCE	MONTHLY PAYM	MENT I	NTEREST RATE		
\$		%	\$	\$		%		
COMPLETE FOR JOINT CREDIT, S	SECURED CREDIT OR IF YOU		COMPLETE FOR JOINT C		DIT OR IF YOU L			
PROPERTY STATE:			PROPERTY STATE: MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)					
MARRIED SEPARATE Employment/Income	D UNMARRIED (Single	e - Divorced - Widowed) START				Divorced - Widowed) START		
		DATE	Employment/Inc	ome		DATE		
NAME AND ADDRESS OF			ADDRESS OF		ــــــــــــــــــــــــــــــــــــــ			
EMPLOYER	EMPLOYER							
NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.			NOTICE: ALIMONY, CHILD S IF YOU DO NOT C	SUPPORT, OR SEPARATE HOOSE TO HAVE IT CON	MAINTENANCE IN ISIDERED.	ICOME NEED NOT BE REVEALED		
EMPLOYMENT INCOME	OTHER INCOM		EMPLOYMENT INCOME		OTHER INCOM			
\$ PER	\$	PER			\$	PER		
NET GROSS	SOURCE		NET GROSS		SOURCE			
State Law Notices OHIO RESIDENTS ONLY: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.					al knowledge of its terms, Please sign if you are not credit being applied for, if			
WISCONSIN RESIDENTS ONL								
unilateral statement under Sec	Luon 700.59, or court deci	ee under Section 700.70 Will	SIGNATURE FOR WISCON	SIN RESIDENTS ONLY		DATE		
		Sign	atures					
1. You promise that everything you have stated in this application is correct to the best of your knowledge. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension, or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions or state chartered credit unions					dit card agreement and dividual and joint share the future to secure your uthorize us to apply the ares and deposits in an that would lose special curity, are not subject to			
X		(SEAL)	X			(SEAL)		
APPLICANT'S SIGNATURE		DATE	OTHER SIGNATURE			DATE		
FOR CREDIT UNION APPROVUSE ONLY DECLINE		CREDIT LIMIT \$	CREDIT CARD N	UMBER				



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VISA CLASSIC/VISA PLATINUM Application and Solicitation Disclosure

t Charges			
Visa Classic 12.50%			
Visa Platinum 7.90%			
Visa Classic 12.50%			
Visa Platinum 7.90%			
Visa Classic 12.50%			
Visa Platinum 7.90%			
Your due date is at least 25 days after the close of each billing cycle. We will not charge you any interest on purchases if you pay your entire balance by the due date each month.			
To learn more about factors to consider when applying for or using a credit card, visit the website of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore.			
None			
None			
Up to \$25.00 Up to \$25.00			

How We Will Calculate Your Balance. We use a method called "average daily balance (including new purchases)."

Effective Date.

The information about the costs of the card described in this application is accurate as of April 1, 2013. This information may have changed after that date. To find out what may have changed, contact the Credit Union.

OTHER DISCLOSURES

Late Payment Fee	\$25.00 or the amount of the required minimum payment, whichever
Returned Payment Fee	is less, if you are one (1) or more days late in making a payment. \$25.00 or the amount of the required minimum payment, whichever is less.
Document Copy Fee	\$12.00
Emergency Card Replacement Fee	\$150.00
Card Replacement Fee	\$10.00
Card Recovery Fee	\$65.00