

Cardholder Information

Name:

Date:

Visa Credit Card Account:

Share Account Number:

Please issue an additional card in the following individual's name:

Name:

Authorized Users Social Security Number:

Authorized User Date of Birth:

Authorized User Phone Home/Cell Phone Number:

Authorized User Email Address:

I understand that as the cardholder I am responsible for all charges made by the authorized users to my account.

Name: _____

Signature: _____

I understand that as the authorized user, I agree that my use of the Visa Credit Card is bound by the terms of the Nymeo Visa Credit Card Agreement.

Name: _____

Signature: _____

The Telephone Consumer Protection Act ("TCPA") requires that in order for us to make certain telephonic contact with you regarding your account that you give us your consent. By signing this request and providing telephone numbers in request, you authorize us to make contact with you for marketing and/or account servicing calls, text messages and informational calls through the use of an automatic telephone dialing system to the numbers you provide as well as the numbers provided in your application.

This consent is not required in order to receive account information, products or services. While we do not presently utilize equipment that does not involve human interaction, we are required by law to inform you that our phone system is capable of such.

You may withdraw the consent provided at any time by giving written notice to us at 5210 Chairmans Ct, Frederick, MD 21703, by email to info@nymeo.org, or by phone at 855-436-4100.

*You may fax the completed form to 240-436-4164.