



3152 17th Ave South, Minneapolis MN 55407  
(612) 722 5004 lcu@latviancu.com

ACCOUNT #

## Debit Card Application

### Primary Applicant

First Name:	Middle Initial:	Last Name:
Address:		
City:	Zip Code:	
State:		
Primary Phone:	Secondary Phone:	
Date of Birth:	SSN:	
Email Address:		
Mailing Address:		
<small>(if different from home address)</small>		

### Joint Applicant

First Name:	Middle Initial:	Last Name:
Address:		
City:	Zip Code:	
State:		
Primary Phone:	Secondary Phone:	
Date of Birth:	SSN:	
Email Address:		
Mailing Address:		
<small>(if different from home address)</small>		

### Business Information (if applicable)

Business Name:
Preferred Name on Card:
<small>(optional)</small>

\_\_\_\_\_  
Primary Member Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Joint Member Signature

\_\_\_\_\_  
Date

Latvian Credit Union is required by the U.S. Patriot Act to verify the identity of new account members and signers added to existing accounts. We may retain copies of all documents we use to verify your identity. An account includes a share account, draft account, debit cards, loan, line of credit or other services we offer. Latvian Credit Union keeps copies of identification secure and confidential and will disclose these copies only as required by law.