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 myCCCU.com  
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# CREDIT CARD APPLICATION



There are costs associated with the use of a credit card. Information about costs, rates and fees may be contained in disclosures provided with this application or by calling us toll-free or collect at 800.347.2228 or writing to us at the address stated on this application.



- **Gives to Missions and Ministries!**  
Over \$5.4 million given
  - **No Annual Fee**
  - **0% APR\* Introductory rate** for 12 months.
  - **0% APR\*** for 12 months on **balance transfers**
  - **Up to 10,000 Bonus CUREwards Points** for cash back, free airfare, premium merchandise, & more!
  - Earn double points for donations to most churches, ministries, and charitable organizations.
- \*See reverse for terms, disclosures and card benefits.*

**Credit Card Account:**  Individual  Joint

**Credit Union Membership Eligibility (Check all that apply)**

**GROUP CODE**

**You can qualify for membership in one of two ways:**

- Through Your Church, Ministry, or School** – You're affiliated with a Christian Ministry (including many Protestant Christian churches and schools) that is within Christian Community Credit Union's field of membership. You may be a member, regular attendee, employee, missionary, or student/alumnus.
- Through Your Family** – You're a relative of a current member of Christian Community Credit Union. Relatives include: spouse, father/mother (and in-laws), brother/sister (and in-laws), son/daughter (and in-laws), grandparent, grandchild, aunt, uncle, niece, nephew or cousin.

I am a Christian Community Credit Union member. Member Number: \_\_\_\_\_

**Affiliation:** I am a/an:  Member  Regular Attendee  Employee  Missionary  Student/Alumnus  Other: \_\_\_\_\_  
 Of (School/Church/Ministry): \_\_\_\_\_  
 Denomination/Affiliation (if known): \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_

**Family:** I am a relative of a Christian Community Credit Union Member.  
 Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

For more information about your membership eligibility, visit [myCCCU.com/membership](http://myCCCU.com/membership) or call 800.347.CCCU (2228)

**How did you hear about us? Please check one.**

- Family  Friend  Work  Church  School  Mail  Email  CCCU  Non-CCCU \_\_\_\_\_
- Online  CCCU Website  Search Result  Other Website: \_\_\_\_\_  CCCU Rep Name: \_\_\_\_\_
- Event/Presentation Name: \_\_\_\_\_  Magazine Name: \_\_\_\_\_
- Social Media:  Facebook  Twitter  Instagram  LinkedIn  YouTube  Other: \_\_\_\_\_  Newspaper Name: \_\_\_\_\_
- Radio: Traditional/Internet: \_\_\_\_\_  Podcast Name: \_\_\_\_\_  Other: \_\_\_\_\_

**Choose Your Card:**  CCCU Visa Signature  International Ministries (IM) Visa Signature  Wildcat Rewards Visa Signature

CCCU World Mastercard  Mission Aviation Fellowship (MAF) Visa Signature

The Credit Union makes a donation to the affinity card partner for every card opened. For details, visit [myCCCU.com/cards](http://myCCCU.com/cards).

**Credit Limit Requested \$**  
 The minimum credit limit on a Signature card is \$5,000. If you do not qualify, Visa Rewards card will be issued.

**Check below to indicate the type of credit for which you are applying. Married Applicants may apply for a separate account.**

**Individual Credit:** You must complete the Applicant section about yourself and the Other section about your spouse if

1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI)
2. your spouse will use the account, or
3. you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate 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 appropriate section below. If Co-Applicant is spouse of the Applicant, mark the Co-Applicant box.

If this is an application for joint credit, Applicant and Co-Applicant each agree and acknowledge the intent to apply for joint credit (sign below):

Applicant	Date
<b>X</b>	(Seal)

Co-Applicant	Date
<b>X</b>	(Seal)

**APPLICANT**

NAME (Last - First - Initial)		
ACCOUNT NUMBER	SOCIAL SECURITY NUMBER/INDIVIDUAL TAX ID NUMBER	
BIRTH DATE	EMAIL ADDRESS	
MOTHER'S MAIDEN NAME		
HOME PHONE	CELL PHONE	BUSINESS PHONE/EXT.
DRIVER'S LICENSE NUMBER/STATE		
PRESENT ADDRESS (Street - City - State - Zip)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	
	LENGTH AT RESIDENCE	
MORTGAGE/RENT OWED TO		
MORTGAGE BALANCE \$	MONTHLY PAYMENT \$	INTEREST RATE %
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)		

**OTHER**  CO-APPLICANT  SPOUSE

NAME (Last - First - Initial)		
ACCOUNT NUMBER	SOCIAL SECURITY NUMBER/INDIVIDUAL TAX ID NUMBER	
BIRTH DATE	EMAIL ADDRESS	
MOTHER'S MAIDEN NAME		
HOME PHONE	CELL PHONE	BUSINESS PHONE/EXT.
DRIVER'S LICENSE NUMBER/STATE		
PRESENT ADDRESS (Street - City - State - Zip)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	
	LENGTH AT RESIDENCE	
MORTGAGE/RENT OWED TO		
MORTGAGE BALANCE \$	MONTHLY PAYMENT \$	INTEREST RATE %
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)		

**EMPLOYMENT/INCOME**

START DATE

EMPLOYMENT STATUS <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME
NAME AND ADDRESS OF EMPLOYER

**EMPLOYMENT/INCOME**

START DATE

EMPLOYMENT STATUS <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME
NAME AND ADDRESS OF EMPLOYER

**NOTICE:** ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.

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GROSS MONTHLY INCOME \$	OTHER INCOME \$	PER
TITLE/GRADE	SOURCE	

GROSS MONTHLY INCOME \$	OTHER INCOME \$	PER
TITLE/GRADE	SOURCE	

**Balance Transfer**

**0 % APR introductory balance transfer rate for 12 months!**

**Yes! I want to save time & money with one low monthly payment. Transfer the following balance/s from my high-rate account/s to my low-rate Visa Signature or World MasterCard. 0% APR for 12 months is only valid when balances are transferred during the first 60 days of account open date. Thereafter, the APR varies based on creditworthiness. Balance transfers are cash advances with no grace period on finance charge. 0% APR does not apply to other Christian Community Credit Union credit cards and loans. A balance transfer fee of 2% with a minimum of \$5.00 will apply.**

Card Issuer: \_\_\_\_\_

Card Account No.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Transfer Amount(\$500 minimum): \$ \_\_\_\_\_

Card Issuer: \_\_\_\_\_

Card Account No.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Transfer Amount(\$500 minimum): \$ \_\_\_\_\_

**The minimum monthly payment on this card is 3% of the outstanding balance, which may be higher than the payment on the account you are transferring.**

**STATE LAW NOTICE(S)**

**Notice to Nebraska Residents:** A credit agreement must be in writing to be enforceable under Nebraska law. To protect you and us from any misunderstandings or disappointments, any contract, promise, undertaking, or offer to forebear repayment of money or to make any other financial accommodation in connection with this loan of money or grant or extension of credit, or any amendment of, cancellation of, waiver of, or substitution for any or all of the terms or provisions of any instrument or document executed in connection with this loan of money or grant or extension of credit, must be in writing to be effective.

**Notice to New York Residents:** New York residents may contact the New York State Department of Financial Services to obtain a comparative listing of credit card rates, fees, and grace periods. New York State Department of Financial Services: 1-800-342-3736 or www.dfs.ny.gov.

**Notice to Ohio Residents:** 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.

**Notice to Wisconsin Residents:** (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened. (2) Please sign if you are not applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.

Signature for Wisconsin Residents Only	Date
X	

**CREDIT CARD CONSENSUAL SECURITY INTEREST**

You grant us a security interest in all individual and joint share and/or deposit accounts you have with us now and in the future to secure your credit card account. Shares and deposits in an IRA or any other account that would lose special tax treatment under state or federal law if given as security are not subject to the security interest you have given in your shares and deposits. You may withdraw these other shares unless you are in default. When you are in default, you authorize us to apply the balance in these accounts to any amounts due. For example, if you have an unpaid credit card balance, you agree we may use funds in your account(s) to pay any or all of the unpaid balance.

By signing or otherwise authenticating below, you are affirmatively agreeing that you are aware that granting a security interest is a condition for the credit card and you intend to grant a security interest.

Security Interest Acknowledgement and Agreement	Date
X	

Security Interest Acknowledgement and Agreement	Date
X	

**SIGNATURES**

By signing or otherwise authenticating below:

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 and for other accounts, products, or services we may offer you or for which you may qualify. 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 crime to willfully and deliberately provide incomplete or incorrect information in this application.
2. You understand that the use of your card will constitute acknowledgment of receipt and agreement to the terms of the Consumer Credit Card Agreement and Disclosure.

Applicant's Signature	Date
X	

Other Signature	Date
X	

**CREDIT UNION USE ONLY**

DATE	<input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED	NUMBER OF CARDS	CREDIT LIMIT \$	CREDIT CARD NUMBER
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Signatures

	Date
X	

	Date
X	