

# PATENT AND TRADEMARK OFFICE FEDERAL CREDIT UNION

Co-Op Concierge

*The Credit Union must receive this completed form prior to travel.*

<b>ACCOUNT #</b>	<b>NAME:</b>	
<b>DEBIT CARD#</b>		
IS THIS A SHARED NUMBER	YES <input type="checkbox"/>	NO <input type="checkbox"/>
JOINT CARDHOLDER NAME:		
<b>CONTACT PHONE NUMBER WHILE TRAVELING:</b>		
<b>CONTACT EMAIL WHILE TRAVELING:</b>		
<b>DETAIL OF TRAVEL PLAN:</b>		
DATE(S) ____/____/20____	PLACE:	
DATE(S) ____/____/20____	PLACE:	
DATE(S) ____/____/20____	PLACE:	
<b>MEMBER SIGNATURE:</b>		DATE:
<b>CREDIT UNION EMPLOYEE SIGNATURE:</b>		
<b><u>IMPORTANT:</u> ►►►►► PLEASE UPDATE CARDHOLDER INFORMATION ON CO-OP ◀◀◀◀◀◀</b>		
<p>Falcon in the US 1-888-241-2440 Collect Intl 1-909-941-1034</p> <p><b>Visa Check Card (not ATM) while traveling in the United States or Overseas Blocked Countries for all transactions: IRAN, MEXICO, DOMINICAN REPUBLIC, MYANMAR (BURMA), SOUTH AFRICA, SUDAN</b></p> <p><b>PIN based transactions only: ITALY, JAPAN</b></p>		