



**Add Authorized User to a MasterCard Credit Card**

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

I hereby authorize you to add:

Name: \_\_\_\_\_

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

Send to Authorized User's Address

SSN: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

to my WCU MasterCard Account #: \_\_\_\_\_  
as an authorized user.

I accept responsibility for all purchases and cash advances.

MasterCard Account Holder Name: \_\_\_\_\_  
(Printed)

\_\_\_\_\_/\_\_\_\_/\_\_\_\_  
Signature of MasterCard Account Holder (Required) Date

\_\_\_\_\_/\_\_\_\_/\_\_\_\_  
FSR Signature Date

\_\_\_\_\_/\_\_\_\_/\_\_\_\_  
Opts Signature Date