



AUTHORIZED USER FORM

Adding an authorized user is a perfect way to share the benefits of your PenFed-issued credit card. Authorized users have full use of and access to the credit card account. However, they do not have the authority to add or delete cardholders, request replacement cards, or terminate/modify the existing card agreement.

To process your request to add an authorized user, please provide the information requested below and return this form to us by:

Mail: PO Box 1432, Alexandria, VA 22313-2032
Fax: 800-557-7328

Authorized User(s)

Full Name Relationship Social Security # Date of Birth

- 1. _____
- 2. _____

By signing below, I understand and agree that in the event of the death of the member cardholder(s), the additional card assigned to me is no longer valid. Any subsequent charges incurred by me, including recurring charges and charges made without the use of the card, become my responsibility to repay.

Authorized User 1 Signature: _____

Authorized User 2 Signature: _____

Cardholder Information

I represent that I _____ am the named account holder and authorize PenFed to add the above listed person(s) as an authorized user(s) on the account referenced below.

Signature of Cardholder

Date

Credit Card Number

Member Number