

## **Credit Card/Debit Card Travel Information Request**

1ember Name (please print)	
1ember Number	Last 4 digits Social Security Number
Date of Departure	Date of Return
Credit Card (Last 4 Digits)	Debit Card (Last 6 Digits)
Are all card holders on th	ne account traveling? ☐ Yes ☐ No
Travel Destination	
	ive □ Fly □ Cruise □ Other
<b>Mode of Travel:</b> □ Dri	
<b>Mode of Travel:</b> □ Dri	(Please Specify)
	(Please Specify)
Best method of reaching	(Please Specify)
Best method of reaching	you while you are away:
Best method of reaching  Cell Phone	you while you are away:
Best method of reaching  Cell Phone	you while you are away:  E-mail address (please print)
Best method of reaching  Cell Phone	you while you are away:  E-mail address (please print)
Best method of reaching  Cell Phone	you while you are away:  E-mail address (please print)
Best method of reaching  Cell Phone  Member Signature	you while you are away:  E-mail address (please print)

Please return to a Branch or Mail to:

River Valley Credit Union 505 Earl Boulevard Miamisburg, OH 45342 Questions: 937-859-6260 ext. 2460 Credit Cards