

VISA® Credit Card - Remove Authorized User Form

I/We _		, would like	to remove the following as
	l User(s) on my/our VISA® accou		
Authorized	l User(s):		
	(Please print name)		
	(Please print name)		
Cardholder	r Name (Please print):		
Signature:		Date:	
Joint Cardh	nolder Name (Please print):		

• The Authorized User(s) card must be destroyed or returned to NSPSPCU with this notice