

Joint Cardmember



Add a Joint Cardmember

A Joint Cardmember is a person you add to your [Harley-Davidson® Visa® Card](#) Account. In the case of a joint account, each Cardmember has the right to use the Account to the extent of the Account credit limit and will be liable for all credit extended under the Account. For your protection, we require your written authorization to add an individual to your Account and we require the signature and agreement of the Joint Cardmember. To request an addition, fax or mail this completed form back to us at the number/address noted below. Your Account terms will not change.

Primary Cardmember Name (please print as it appears on your card):

First _____ Middle _____ Last _____

Harley-Davidson® Visa Account Number: _____ - _____ - _____ - _____

Primary Cardmember's Total Annual Income* **: _____ Monthly Housing Payment: _____ Own Other

*Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

**Include personal and, if applicable, spousal/domestic partner income. Total annual income can include wages, retirement income, investments, rental properties, etc. APPLICANTS UNDER 21: Only provide income earned by the applicant.

Primary Cardmember Signature: _____ Date: ___/___/_____

Joint Cardmember Name (please print): First _____ Middle _____ Last _____ Suffix _____

Date of Birth: _____ Social Security Number: _____ - _____ - _____

Home Phone: _____ - _____ - _____ Cell Phone (optional): _____ - _____ - _____

Street Address (no P.O. Boxes, U.S. Addresses Only): _____

City _____ State _____ Zip Code _____

Mailing Address (if different than above): _____

Country of Citizenship: _____

Joint Cardmember Employment Status (Choose One):

Full-Time Employment Part-Time Employment Unemployed Self Employed Homemaker Retired Student Military

Occupation _____ Work Phone Number (_____) _____ - _____

Joint Cardmember's Total Annual Income**: \$ _____ Monthly Housing Payment: _____ Own Other

*Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

**Include personal and, if applicable, spousal/domestic partner income that was not already included by the primary cardmember. Total annual income can include wages, retirement income, investments, rental properties, etc. APPLICANTS UNDER 21: Only provide income earned by the applicant.

Main Source of Joint Cardmember's Total Annual Income (Choose One):

Employment Income Sale of Property Investments Inheritance Rental Income Business Ownership/Sole Proprietorship
 Government Program Social Security Trust Fund Disbursements Pension/Retirement Income Other _____

For Wisconsin residents only: Married Wisconsin residents must provide the name and address of their spouse below. If this credit Account is opened, we may give notice of the opening to the Cardmember's spouse.

I am: Unmarried Married and the name of my spouse is: _____

Spouse resides at: The address shown above or at _____

U.S. Bank National Association ("we", "us", and "our") may request consumer credit reports about you for evaluating this request and in the future for reviewing Account credit limits, for Account renewal, for servicing and collection purposes, and for other legitimate purposes associated with your Account. Upon your request, we will inform you if a consumer report was requested and, if it was, provide you with the name and address of the consumer reporting agency that furnished the report. By providing us with a telephone number for a cellular phone or other wireless device, including a number that you later convert to a cellular number, you are expressly consenting to receiving communications - including but not limited to prerecorded or artificial voice message calls, text messages, and calls made by an automatic telephone dialing system - from us and our affiliates and agents at that number. This express consent applies to each such telephone number that you provide to us now or in the future and permits such calls for non-marketing purposes. Calls and messages may incur access fees from your cellular provider.

By signing below as a Joint Cardmember, I understand that I will be individually and jointly liable for credit extended on this Account, and I agree that information I have provided on this form is true and correct and that I will abide by the terms of the Cardmember Agreement, which will arrive with my Harley-Davidson® Visa Card.

Joint Cardmember



HARLEY-DAVIDSON®
VISA®

Joint Cardmember Signature: _____ Date: ____/____/____

IMPORTANT INFORMATION ABOUT ADDING A NEW ACCOUNT HOLDER TO AN ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask you for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

If you have further questions, please contact our 24-hour Cardmember Service Department at 800-699-2281. We are here to provide solutions for your banking needs and look forward to serving you in the future.

Please fax your completed form to: 1-866-568-7729

Or mail to: U.S. Bank National Association, PO Box 6339, Fargo, ND 58125-6339

The creditor and issuer of the Harley-Davidson® Visa Card is U.S. Bank National Association, pursuant to a license from Visa U.S.A. Inc.

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