



NOTICE OF INTERNATIONAL TRAVEL

Please include all card numbers that will be involved in the traveling. Please provide as much information as possible including all cell phone numbers, email addresses, and any other known ways to make contact in the case of an emergency.

Member Name _____	Account Number _____
Card Numbers (include debit, credit and ATM) _____	

Travel Dates _____	
Destination(s) _____	

Contact Information:	
Cell Phone Number(s) _____	

Email Address _____	

Other Phone Number(s), Addresses, or Ways to Contact You	

I hereby provide notice to Florida Credit Union of my intent to travel internationally. I request access for the cards listed herein, during the time period specified, in the countries listed above. I understand access may be limited or unavailable in other locations or during other periods of time. I understand access may be limited to ATMs with the Plus or Star logo. I understand cash advances may be made where Visa Cash Advances are supported. I understand that daily limits are placed on these cards to protect my risk exposure. I further understand I am assuming the risk of using the cards in international settings where fraud may occur.	
Member Signature: _____	Date _____

Return form to Plastic Card Department, Florida Credit Union, PO Box 5549, Gainesville FL 32627 or fax to (352) 264-2678