



Visa/Debit Card Travel Notification

Member Account Number: _____

Cardholder Information:

Visa Card Number: _____ Debit Card Number: _____

Last Name: _____ First Name: _____

E-mail Address: _____

Phone Number: _____ Type: _____

Phone Number: _____ Type: _____

Travel Details:

Date From: _____ Date To: _____

Destination Country (if applicable): _____

State(s) (if in the US): _____

Travel Details (flying, driving, etc): _____

For Visa Card Only: Z = Travel Exclusion to include Real Time Decision

This option will flag an account when the cardholder is traveling, preventing the card from being temporarily blocked for suspicious activity during their travel within the timeframe specified. However, Real Time Decisioning will continue to monitor for highly risky authorizations, resulting in a decline received at the point of sale. Exclusion Start Date and Exclusion End Date are required for Action Code.

Members Signature (Not Required): _____
(Out of wallet verification is required for last minute notification by member. Obtain signature whenever possible on Travel Notification.)

SCCU Employee's Signature: _____ Date: _____

Visa Processed by: _____ Date: _____

Debit Card Processed by: _____ Date: _____

** All information is to be completed by member traveling, or employee if over phone. We can use this information to update accounts as necessary.*