

POWERCASH® VISA® PAYROLL CARD CONSENT FORM

To the Parent(s) or Guardian(s) of:
[NOTE: Please print clearly in ALL CAPS]

First Name					MI	Last Name														

Street Number					Street Address																

City					State	Zip Code															

Subject: Authorization to issue or maintain a Powercash Visa Payroll Card (“**Powercash Card**”) for the employee/cardholder listed above who is under the age of majority (18 in most states) in the state where (s)he is employed.

Your minor child has expressed an interest in enrolling in the direct deposit of payroll to a Powercash Card. Pursuant to state law, your child may not enter into a legally binding contract or agreement until (s)he reaches the age of majority in the state of employment. However, as the parent or guardian of the individual referenced above you may consent to the Cardholder Agreement (as described below) on your child’s behalf.

The Cardholder Agreement, which was included in the card packaging materials that your child received from his/her employer, outlines the terms and conditions of the Powercash Card as well as certain protections related to privacy and the limitation of liability. If you consent, your child will be the registered owner of the Powercash Card with full access to the Powercash Card balance and the ability to use the card to obtain cash or make purchases at his/her discretion. If you desire balance information or transaction data associated with your child’s use of his/her Powercash Card, your child will be responsible for providing this information to you.

Please indicate your preference below and provide the information requested.

I authorize my child to become a registered Powercash cardholder and receive a Powercash Card. I have reviewed and understand the terms and conditions outlined in the Cardholder Agreement.

Signature of Parent or Guardian

Date

Printed Name

By selecting this option, you agree to send a copy of your driver’s license, State ID or other government issued photo identification to Brightwell Payments by mail to P.O. Box 724026, Atlanta, GA 31139 Attn: Compliance or by fax to 678-302-4445. Please include your child’s full name on all correspondence.

I do not authorize my child to use the Powercash Card. Please check with your child’s employer regarding other methods of wage payment such as a paper check or direct deposit to a checking or savings account.

Should you have questions regarding the Cardholder Agreement or the Powercash Card, please call 1-800-963-2072.