

## **JMU Prepaid Payment Card STUDENT CARDHOLDER AGREEMENT**

I \_\_\_\_\_, agree to the following regarding my use of the JMU Prepaid Payment Card.

1. I will not allow others to use my card and will ensure that my card is kept secure at all times.
2. I agree that the card may only be used for official business and travel expenses.
3. I understand that the purchase of alcoholic beverages with this card is prohibited.
4. I am aware my Prepaid Card has funding limits and I agree to track and abide by those limits. I understand the university does not have access to my card balance or the capability to reset my online account access.
5. I acknowledge that I have been provided with and have reviewed the associated fee schedule for the card.
6. I acknowledge the requirement to submit a completed GSA Per Diem Calculation form and a Prepaid Payment Card Funding Request in order to request funding on this Prepaid Payment Card. All international travel also requires a copy of a completed, approved Travel Authorization.

7. I agree that if I violate the terms of this Agreement and use the Prepaid Payment Card inappropriately, I will be required to reimburse James Madison University for all incurred charges and any fees related to the collection of those charges. I further understand these charges and/or fees may be added to my student account.
8. I understand that failure to follow these procedures may result in revocation of my card use privileges.

\_\_\_\_\_  
Student Name (Print/Type)

\_\_\_\_\_  
Team or Department (Print/Type)

\_\_\_\_\_  
Street Address (Print/Type)

\_\_\_\_\_  
City, State, Zip (Print/Type)

\_\_\_\_\_  
Date of Birth (DD/MM/YYYY)

\_\_\_\_\_  
JMU Email (Print/Type)

\_\_\_\_\_  
Student ID#

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Student Signature & Date