

[] CHECK CARD [] ATM CARD
(Mark One)

Acct #: _____ MSR #: _____ Date: _____

Primary Name: _____ e-mail _____

Address: _____ PO Box / Apt # _____

City: _____ State: _____ Zip: _____

Phone: _____ Social Security #: _____

Joint Member: _____

Address: _____

Phone: _____ Social Security #: _____

Accounts to Access: _____

- By signing this agreement, I/we agree to be governed by the terms and conditions of the VISA ATM/CHECK Card Account as described in the agreement disclosure statement given to me. The information I have provided is true, accurate and complete to the best of my knowledge and belief. I realize the Credit Union has the right to check my credit history or use other methods in finding out my credit worthiness.
- By signing this agreement, you understand that when using your Check Card at gas stations "Pay at the Pump", hotels, etc. there may be a "pre-authorized hold" placed on your account by the merchant. This will hold the amount of money requested by the merchant, i.e. \$50 to \$75, from your account for approximately 3 days. You will not have access to this money until the merchant's hold drops off of your account. By signing below you understand that you are held responsible for any and all fees incurred during the periods of these holds.

Primary Signature: _____
Date

Joint Signature: _____
Date

Office Use Only	
ChexSystems: Approved / Denied	Teller # _____ Date: _____
If approved: give disclosure packet.	Supervisor # _____
Reason for new card _____	
Card (P) #1 _____	
Card (J) #2 _____	