



PERSONAL ATM and VISA® Debit Card Application

Cardholder Name: _____ Member RCIF #: _____

Mailing Address: _____

Daytime #: _____ Evening #: _____ E-Mail: _____

I would like the following type of card (select one type only):

- VISA Debit Card 43060429** _____ - MECU checking account required.
Provides unlimited ATM usage at MECU, M&T and CO-OP ATMS – no additional fees.
- OR
- Embossed (Mail) ATM Card 58158630** _____
Provides unlimited ATM usage at MECU, M&T and CO-OP ATMS – no additional fees.
- OR
- Instant Issue ATM Card 58158633** _____ **PIN** _____ **Offset:** _____
Provides unlimited ATM usage at MECU, M&T and CO-OP ATMS – no additional fees.

This application is for a:

- New Card** (first time applying) – Must be 18 years of age or older. *Exception: A 16 or 17 year old may have a card provided an owner on the account is a parent/guardian and he/she signs the Card application.
- OR
- Replacement Card** (new card number and PIN will be issued unless the old card is returned at time of request).
Original Card # _____ Indicate if original card was: Lost/Fee Damaged Never Received or
 Stolen; Police Report # _____ City/County: _____

Indicate Accounts To Be Accessible By Cards(s):

****You must be an owner on account(s) linked to your card****

Primary Accounts Only Are Accessible at All ATMs

- Primary Savings #:** _____ **Secondary Savings #:** _____
- Primary Checking/MMA #:** _____ **Secondary Checking/MMA#:** _____
All VISA Debit POS/Signature transactions will be debited from the Primary Checking account.
- Personal Line of Credit #:** _____
Accessible at MECU ATMs only.

I/We understand that the use of the MECU ATM or VISA Debit Card means that I/we accept the Terms and Conditions as outlined in the MECU Membership Account Agreement and Disclosures, Funds Availability Disclosure, Electronic Fund Disclosure, Truth and Savings Rate and Fee Schedule, Credit and Security Agreement (including the Addendum and a Credit Insurance Certificate if applicable incorporated herein by reference) that I/we received at time of account opening.

Cardholder's Signature** _____ Date: _____

*Signature of Account Owner/Parent/Guardian: _____ Date: _____

Signature of MECU Employee Completing & Verifying Application _____ Teller # _____ Branch Name _____ Date _____

Distribution: Scan all applications into Optical/Miser forms