



Debit Card Application

Print Primary Owner Name: _____

Print Joint Owner Name: _____

Address: _____

Account # _____

Phone: _____

The credit union will not be responsible for failure or refusal to honor your card. If a merchant agrees to give you a refund or adjustment, you agree to accept a credit to your account in lieu of a cash refund.

You must keep your PIN confidential. If you fail to maintain the security of your PIN you are in violation of the debit card agreement and we may terminate your debit card privileges.

All owners of the accounts accessed by the card issued under this agreement shall be bound by this agreement. All shall be responsible for the transactions authorized by the use of the debit card.

Lost or stolen cards and suspicious activity must be reported to the credit union immediately.

There may be fees and charges associated with certain debit card transactions or use. Please refer to our fee schedule for a list of these charges. You will be notified of any changes in our fee schedule as required by law.

Cardholders must be 18 years of age or older and credit scores may be considered in the approval process.

By supplying information and signing below, I give authorization to the credit union to obtain further credit information from a credit bureau. I agree to the terms listed above and attest that I am at least 18 years of age. I further agree that if a debit card is issued to me by the credit union that I am liable for all transactions of any kind performed by me or anyone to whom I entrust my card. I acknowledge that the debit card is the property of the credit union and that I must surrender possession of it at any time, if so demanded by their authorized agent.

Signature of Primary Owner: _____

Signature of Joint Owner: _____

For Office Use Only			
Approved _____	Denied _____	Date _____	MSR _____