

**Debit/ATM Card Application**

**Maximum Account Convenience**

When you need cash, an Extra Credit Union Debit card or ATM card can be a life saver. It gives you 24-hour access to your available funds and allows you to access your account from ATMs everywhere. Plus, the debit card even allows you to have a better way to pay when dining out, shopping or filling up the gas tank.

**Debit Card**

This versatile card serves as both an ATM card and as an electronic check card for purchases. You can use it at a variety of merchants in the U.S. and across the globe — anywhere that accepts MasterCard®. Each purchase amount is deducted electronically from your checking account. Consider these valuable benefits:

- It's safer than carrying cash and faster than writing checks.
- It gives you the convenience of a credit card without the interest, debt or bills.
- You can also use it just like an ATM card for transactions at cash machines everywhere.

**ATM Card**

An Extra Credit Union ATM card gives you convenient access to your accounts 24 hours a day, seven days a week. Plus, when used at any of the thousands of ATMs displaying the CO-OP Network logo, cardholders pay no fees!

Use your Debit card or ATM card to:

- Make cash withdrawals
- Deposit funds
- Obtain account balances
- Transfer funds between accounts (with the same account number)
- Make loan payments
- Receive an advance on your line of credit
- Purchase postage stamps (at select ATMs)

Visit [ExtraCreditUnion.org](http://ExtraCreditUnion.org) for additional information or to search for a surcharge-free CO-OP Network ATM near you! Or call us at (586) 276-3000.

I would like to apply for a new:	<input type="checkbox"/> Debit Card	<input type="checkbox"/> ATM Card
I currently have a:	<input type="checkbox"/> Debit Card	<input type="checkbox"/> ATM Card
And would like to apply for a:	<input type="checkbox"/> Replacement Card*	
	<input type="checkbox"/> Card Upgrade	
	<input type="checkbox"/> PIN Reissue	
This request will be for:	<input type="checkbox"/> Primary Member	
	<input type="checkbox"/> Joint Member	
	<input type="checkbox"/> Both	
*Cards will be ordered with name as it appears on current account		

Applicant Information	
Extra Credit Union Member Number	
Name (Primary Member)	Social Security #
Name (Joint Owner)	Social Security #
Address Apartment Number	
City State Zip Code	
Daytime Phone Number ( )	Home Phone Number ( )
E-Mail Address	
<p><small>I/We authorize Extra Credit Union to investigate my/our credit history, employment and income, including obtaining consumer reports, in connection with my/our application for membership and for any update, renewal or extension of credit I/we may apply for or receive from the credit union. I/we authorize the credit union to report my/our credit record to consumer reporting agencies or other firms seeking information. If I/we request, in writing, the credit union will provide me/us with the name and address of any consumer reporting agency from which the credit union received a consumer report on me/us. I/We understand that if I/we qualify for a Debit card or an ATM card, I/we will be sent a full disclosure of all terms and conditions governing the use of the card, as well as complete information of fees. By signing or using the card, I/we agree to be bound by the terms and conditions outlined in the disclosure.</small></p>	
Primary Member Signature	Date
Joint Owner Signature	Date

Replacement Card or PIN Request Information
<p>If you are requesting a replacement Debit card or ATM card, or have forgotten your personal identification number (PIN) and are requesting a PIN reissue, please complete and sign the form above, along with completing and initialing the following information: Reason for replacement card request, if applicable (check one):</p> <p><input type="checkbox"/> Lost Card</p> <p><input type="checkbox"/> Stolen Card</p> <p><input type="checkbox"/> Damaged Card</p> <p><input type="checkbox"/> Unauthorized Use/Fraud</p> <p><input type="checkbox"/> Other</p> <p>As outlined in the Electronic Fund Transfer Agreement and the fee schedule provided to me when I received my Debit card or ATM card, I agree to the fee(s) associated with my request. (Replacement Card - \$5; Replacement PIN - \$5) Please deduct the applicable fee from my (circle one) checking savings account. <b>INITIAL HERE</b> _____</p>