



# ATM/Visa Check Card Application

This application is for:  ATM Card(s)  Visa Check Card(s)

Please Note: To receive an ATM/Visa Check card you must have an active checking account with us. Your 24-hour ATM/Visa Check Card will be ordered as soon as we review your current checking account or once your application has been reviewed. If you have any questions, please call our Member Service Team at (800) 874-5544. Representatives are available Monday through Friday, 8:30 a.m. to 7:00 p.m. ET.

**A PIN will be sent to you via mail. You will also have the option to select your own PIN once you receive your card.**

PRIMARY MEMBER INFO					
LAST NAME	<input type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> MS.	FIRST NAME	MIDDLE INITIAL	ACCOUNT #	PHONE

JOINT OWNER INFO				
LAST NAME	<input type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> MS.	FIRST NAME	MIDDLE INITIAL	PHONE
STREET ADDRESS (Permanent residence address; No P.O. Box #) <input type="checkbox"/> SAME AS PRIMARY OWNER		CITY	STATE & ZIP	
MAILING ADDRESS (If different from above)		CITY	STATE & ZIP	

ACCOUNT INFO
<p>Your ATMCard(s) will enable you to access one savings account and one checking account.</p> <p>Please indicate your choice here:</p> <p>SAVINGS: Suffix #: _____</p> <p>CHECKING: Suffix #: _____</p> <p><input type="checkbox"/> Checking Reserve (if applicable)</p>

\_\_\_\_\_  
Primary Member Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Joint Owner Signature (if applicable)

\_\_\_\_\_  
Date