



ATM & DEBIT CARD APPLICATION

I would like to apply for (check one): HRCU Debit Card *Checking Account required* Business Debit Card *Business Checking required* ATM Card HSA Debit Card *Health Savings Account required*

Personal Accounts

Primary Applicant: _____
Last Name First Name Middle Initial

Joint Applicant: _____
Last Name First Name Middle Initial

Please issue the above card(s) with access to the following accounts:

Membership Number	Account Type	Checking	Savings
<input type="text"/>	Account Number	<input type="text"/>	<input type="text"/>

Business Accounts

Business Name: _____

Authorized User(s): _____
Be sure authorized users named here are listed as such on business account

_____ Last Name First Name Middle Initial

_____ Last Name First Name Middle Initial

Please issue the business debit card(s) with access to the following accounts:

Membership Number	Checking Account Number
<input type="text"/>	<input type="text"/>

Acknowledgment: I/we hereby acknowledge that a copy of the Cardholder Agreement and the Disclosure Statement will be sent to me/us once my/our application has been approved. Use of the card(s) signifies that I/we have read, understand and agree to be legally bound by the terms and conditions of said document. I/we also acknowledge said documents to be a legal disclosure of my rights under the Electronic Funds Transfer Act. If I/we do not agree with the terms and conditions, I/we will destroy the cards upon receipt.

Signatures Required: _____
Applicant's Signature Date Joint Applicant's Signature Date

Business Accounts: _____
Authorized User's Signature Date Authorized User's Signature Date

For Internal Use Only: Card Number: _____