CUe*Card* Application

I/We request a: ☐ CUe*Card* (Debit Card) ☐ Reissue Card ☐ New Card

Member Information

Member Name

Street Years There

City State Zip

Social Security Number DOB

Home Phone Work Phone

Home/Office Email Address

Employer Salary Years

Joint Owner Information

Member Name

Street Years There

City State Zip

Social Security Number DOB

Home Phone Work Phone

Home/Office Email Address

Employer Salary Years

I would like to access to the following accts:

Primary Checking Acct #*

Primary Savings Acct #

Additional Acct # - Available at YFCU owned ATMs only

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I/We are also interested in the following electronic services:

☐ HomeBr@nching ☐ Bill P@y ☐MARS (Audio Response) ☐ Pre-Authorized Payments/PR Deduction

Agreement

By checking the boxes above and signing below, you certify that the information on this application is complete, true, and submitted for the purpose of obtaining the electronic service(s) and account(s) requested. If approved for the requested electronic funds transfer service, you acknowledge receipt and agree to the terms of the Electronic Funds Transfer Agreement. I further agree:

1. That if I/we do not use the CARD(s) and Personal Identification Number within any consecutive 12 month period, this service will be automatically terminated without notice to me.
2. That the CARD(s) and Personal Identification Number will be subject to any Terms and Conditions on the Application for checking or savings accounts or any other Agreement pertaining to such account, and to any rules, regulations and amendments thereto in effect at any time at the Credit Union.
3. That the Credit Union may terminate, or withhold the service of providing the ability to initiate transfers to or from my accounts at any time without notice to me and without in any way affecting any of my obligations to the Credit Union.
4. I/We agree that I will not use my CARD(s) for any transaction that is illegal under applicable federal, state, or local law.
5. I/We authorize the credit union to verify credit and employment history by any necessary means, including preparation of a credit report by a credit reporting agency on the undersigned as individuals.

X Member Signature

Date

X Joint Owner Signature

Date

*All ATM access fees and POS transactions will be deducted from this account.

For Credit Union Use Only

Member CUe*Card* #

Joint Owner CUe*Card* #

Member FICO Score | Cash Limit | POS Limit | Joint Owner FICO Score

Approved by Date Keyed by Date

Rev 06/09/08