

## MANAGE FOR FINANCES WITH EASE!

A Rockland Employees FCU checking account and Visa® Check Card offers you the ultimate in convenience and savings in managing your finances on a daily basis.

### Checking

With benefits not available from most other types of financial institutions, a REFCU checking account is the one you'll want to use to manage your family's finances. You may save hundreds of dollars each year.

REFCU appreciates the checking business of our members and, unlike other financial institutions, we don't charge exorbitant fees to access or manage your money:

- **NO Minimum Balance**
- **NO Monthly Service Fee**
- **NO Per-Check Charge**
- **Overdraft Protection**

Like an ATM card but better, the Visa® Check Card is the fast, convenient and safe way to pay for things you might normally pay for using cash or a personal check. And, because it acts like an ATM card, you can withdraw cash at thousands of ATMs worldwide that display the Visa logo.

### Safer Than Carrying Cash

Rather than using cash, credit-cards or personal checks to pay for purchases, using REFCU Visa® Check Card allows you to complete these transactions accessing money in your REFCU checking account.

Simply present your REFCU Visa® Check Card for payment and the transaction amount will be deducted from your REFCU checking account. No bills to pay, not interest expense incurred, and all transactions will appear on your month checking account statement just as if you had written a check!

### No Transaction Fees

More convenient and quicker than writing a check. Just present your Visa Check Card and the transaction will be completed without the need to present identification. Members who qualify for a REFCU Visa® Check Card may be eligible to receive a \$500 credit line with the credit union.

### Don't Delay, Act Today!

Begin saving time and money and experience the convenience of a REFCU checking account and Visa® Check Card today! Simply complete the attached application and mail or fax it to the credit union.

#### Rockland Employees Federal Credit Union

170 East Central Avenue  
Spring Valley, NY 10977  
Phone: (877) 922-2822  
Fax: (845) 371-2652

## REFCU VISA® CHECK CARD EASY APPLICATION

Complete this application, detach, fold and tape. Fax, deliver or mail (postage required)

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone - Day: \_\_\_\_\_ Evening: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

CU Account Number: \_\_\_\_\_

Co-Applicant's Name: \_\_\_\_\_

Co-Applicant's Date of Birth: \_\_\_\_\_

Co-Applicant's Relationship to Applicant: \_\_\_\_\_

Co-Applicant's Social Security Number: \_\_\_\_\_

### A. CHECKING

I currently have a credit union checking account

Checking Account Number: \_\_\_\_\_

I want to open a credit union checking account

Individual Account  Joint Account

Overdraft protection option:

From Share Savings  Line of Credit

I want a VISA® Check Card to access my credit line on checking account

Individual Account  Joint Account

NOTE: Once your credit card is activated, the credit union will not retain your PIN. If you lose or forget your PIN, it will be necessary for you to apply for a new card.

I/We authorize the credit union to obtain credit information necessary to process my/our request for a Visa® Check Card. By submitting this application you agree to review the checking account and card disclosure and abide by the terms and conditions of the agreement

\_\_\_\_\_  
Signatures (Applicant) Date

\_\_\_\_\_  
Signature (Co-Applicant) Date

## AGREEMENT FOR VISA® CHECK CARD

In this agreement the words "you", "your" mean any holder or authorized user of your Visa® Check Card. The word "we" and "us" mean the financial institution named on the reverse side hereof where you have a checking or savings account. "Checking Account" means your NOW account, share draft account or checking account. "Savings Account" means your share account or regular statement savings account. "EFT Terminal" means an electronic funds transfer terminal; this includes automated teller machines, point of sale terminals, and other EFT devices. "Check Card" means each magnetically encoded Check banking card provided to you by us. "PIN" means the personal identification number selected by you for use with your Check Card. By signing the attached forms or by use of your card, you agree with us as follow:

**1. Check Card.** Each Check Card issued to you pursuant to this Agreement is our property and may be cancelled or repossessed at any time, with or without cause. You may surrender to us on demand each Check Card issued to you. If you permit or authorize other persons to use your Check Card and PIN, you will be liable on or for the resulting transactions. To guard against anyone making a transaction that you have not authorized, you should take all reasonable precautions to prevent any other person from learning your PIN. You cannot use the Check Card for financial transactions until we have validated it.

### 2. In Case of Errors or Questions About Your Electronic Transfers.

Telephone or write us at the telephone number and address shown on the reverse side hereof as soon as you can, if you think your statement of receipt is wrong or if you need more information about a transfer listed on your statement of receipt. We must hear from you no later than 60 days after we sent the FIRST statement on which the problem or error appeared. (a) Tell us your name and account number (if any). (b) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information. (c) Tell us the dollar amount of the suspected error. If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days. Our business days are listed on the reverse. We will tell you the results of our investigation within 10 business days (this time period will be 20 business days for complaints or questions that relate to payment or purchases at the point-of-sale) to investigate your complaint or question. If we decide to do this, we will re-credit your account within 10 business days (20 business days for complaints or questions that relate to payment of the purchase at the point-of-sale) for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account.

**3. Account Information.** We will disclose information to third parties about your account or the transfers you make (a) Where it is necessary for completing transfers or resolving errors involving transfers; or (b) In order to verify the existence and condition of your account for a third party, such as a credit bureau or a merchant; or (c) If you give us your written permission.

**4. Transaction Receipts.** You can get a receipt at the time you make any transfer to or from your account using an EFT Terminal.

**5. Our Liability For Failure to Make Transfers.** If we do not complete a transfer to or from your account on time or in the correct amount according to the agreement with you. We will be liable for your losses or damages. However, there are some exceptions. We will NOT be liable, for instance; (a) If, through no fault of ours, you do not have enough money in your account to make the transfer; (b) If the transfer would go over the credit limit on your overdraft line, if you have one, (c) If the automated teller machine where you are making the transfer does not have enough cash; (d) If the EFT Terminal or processing system was not working properly and you knew about the breakdown when you started the transfer; (e) If circumstances beyond our control (such as fire or flood) prevent the transfer, despite reasonable precautions we have taken; (f) If the funds in your account are subject to legal processes or other encumbrance restricting the transfer; (g) If your PIN or Check Card is reported lost or stolen; or (h) If we are holding uncollected funds in your account and the transfer would require the use of those funds. There may be other exceptions stated in our account agreement with you.

**6. Your Liability.** Tell us AT ONCE if you believe your Check Card or your PIN has been lost or stolen. Telephoning is the best way of keeping your possible losses down.

(continued on reverse side)

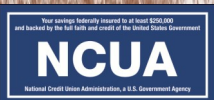
# CONVENIENT CASH FOR YOUR BUSY LIFE

PLACE  
STAMP  
HERE



**VISA®**  
**CHECK CARD**

**Rockland Employees  
Federal Credit Union**  
170 East Central Avenue  
Spring Valley, NY  
10977  
Phone: (877) 922-2822  
Fax: (845) 371-2652



**Rockland Employees Federal Credit Union**  
170 East Central Avenue  
Spring Valley, NY 10977

You could lose all the money in your account (plus your maximum overdraft line of credit if you have one). If you tell us within 2 business days, you can lose no more than \$50.00 if someone used your Check Card or PIN without your permission. If you do not tell us within 2 business days after you learn of the loss or theft of your Check Card or PIN and we can prove that we could have stopped someone from using your Check Card or PIN without your permission if you had told us, you could lose as much as \$500.

Also, if your statement shows transfers that you did not make, tell us at once. If you do not tell us within 60 days after the statement was mailed to you, you will be liable for up to \$50.00 of loss that occurs during such 60-day period and you may not get back any money you lost after the 60 days if we can prove that we could have stopped someone from taking the money if you had told us in time. If a good reason (such as a long trip or hospital stay) keep you from telling us, we will extend the time periods to a reasonable time.

7. Any withdrawal which does exceed the available balances must be repaid immediately. In the event it is necessary to refer Collection of any amount to an Attorney, you will be liable for the Credit Union's reasonable Attorney's fees. You shall be responsible for all costs of collection and penalty charges. The Credit Union may without prior Notice, exercise its right of setoff as to any amount so owing.

8. You may withdraw no more than \$510 in a 24-hour period using your Visa® Check Card.

9. Maximum daily dollar amount for other transactions is \$4,000.

10. The following fees also apply to the Card. Card Replacement fee is \$15. Insufficient Funds fee is \$25. ATM fee is \$1.75 per transaction.

11. You Visa® Check Card is limited to 8 transactions per day per account.

12. **Reporting Lost Cards or PINs or Unauthorized Transfers.** If you believe your Check Card or PIN has been lost or stolen or that someone transferred or may transfer money from your account without permission, call or write us at the telephone number and address on the reverse side hereof.

13. **Types of transactions.** You may use your Check Card with your PIN to: (a) Perform the transactions as stated above; (b) Perform other Check services as may be available from time to time, and for which we send separate notification to amend this agreement. Some of these services may not be available to you at all EFT Terminals. If you have more than one account with us, some of these services may not be available for each account. On each processing day: (A) you may withdraw from automated teller machines up to a maximum of the amount shown (or your available balance, if it is less than such amount). From each account accessed by our Check Card; and (B) by use of point-of-sale terminals you may buy in goods or services up to a maximum of the amount shown (or your available balance, if it is less than such amount). Every calendar day is a processing day, except that Saturday, Sunday and Monday are treated as a single processing day. For security reasons, there are other limits on the number and size of transfers or withdrawals you can make using your Check Card. In all cases, you agree to be responsible for all transfers authorized by you or from which you receive any benefit.

14. **Periodic Statements.** You will get a monthly account statement for your checking account. You will also get a monthly statement for your savings account unless there are no transfers in a particular month.

15. **Service Charges.** Information regarding service charges for use of your Check Card is contained in this agreement.

16. **Modification of this Agreement; Termination.** The terms of this Agreement may be changed by us from time to time by notice from us to you. We may revoke your right to use your Check Card at any time. You agree to pay us for any cash withdrawals, service charges, or other items that remain unpaid at the time this Agreement is for any reason terminated.

17. **Applicable Laws.** This Agreement is governed by the laws of the state where our principal office is located (as shown on the reverse side hereof).

18. **Agreement.** Your Signature on the attached form will evidence your agreement to be bound by the terms and conditions of this Agreement.

**Detach here. This information should be retained for your records.**