

## AGREEMENT FOR VISA CHECK CARD

In this Agreement the words "you," "your" and "yours" mean any holder or other authorized user of your VisaCheck Card. The words "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 CheckCard. By signing the attached forms or by use of your card, you agree with us as follows:

1. **Check Card.** Each Check Card issued to you pursuant to this Agreement is our property and may be cancelled or repossessed by us 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 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 or receipt. We must hear from you no later than 60 days after we sent you 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 recredit your account within 10 business days (20 business days for complaints or questions that relate to payment of 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 recredit 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 our 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. You could lose all the money in your account

## REFCU VISA CHECK CARD EASY APPLICATION

Complete the 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 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 desired:

From Share Savings     Line-of-Credit

I want a VisaCheck Card to access my credit line on checking account

Individual Account     Joint Account

NOTE: Once your card is activated, the credit union will not retain you 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 as necessary to process my/our request for a VisaCheck Card. By submitting the application you agree to review the checking account and card disclosure and abide by the terms and conditions of the agreement.

\_\_\_\_\_  
Signature Applicant Date

\_\_\_\_\_  
Signature Co-Applicant Date