



## DEBIT CARD APPLICATION

To request an Atlantic Financial Federal Credit Union Debit Card, please complete the following information. Each member on an account must complete a separate form to receive their own individual card.

**PLEASE INDICATE IF THIS IS A:**

<input type="checkbox"/> New Card	<input type="checkbox"/> Joint Card	<input type="checkbox"/> Name Change	<input type="checkbox"/> Lost/Stolen Card Replacement	<input type="checkbox"/> Damaged Card Replacement
<i>(There is a \$10 fee for a card replacement or lost/stolen card replacement unless a police report is provided)</i>				

**CARDHOLDER INFORMATION**

Mr. / Mrs. / Ms.	Last Name	First Name		Middle Initial
Address		City	State	Zip Code
Date of Birth	Social Security #	AFFCU Account #	Email Address	
Home Phone		Cell Phone	Work Phone	

***Your AFFCU Debit Card will be shipped at no cost to you within 10-20 business days via USPS. If faster delivery is needed, please see Rush Delivery options below.***

**RUSH DELIVERY REQUEST (OPTIONAL)**

By selecting an option below, I understand that I am authorizing that my account be deducted the applicable charge, listed by my selection, in order to fulfill the rush delivery. Please select the desired rush delivery option and applicable cost. Yes, please rush the delivery of my AFFCU Debit Card. (Both options exclude weekend delivery)

- Overnight Delivery (\$69.50 charge)     Two-Day Delivery (\$37.50 charge)

**SIGNATURES**

Information on this request is true and correct to the best of my knowledge. If this request is approved, I will be mailed an Atlantic Financial Federal Credit Union (AFFCU) cardholder agreement with my AFFCU Debit Card. As soon as I receive my card and Personal Identification Number (PIN), or use the card, I am legally bound by the agreement. I agree not to let anyone else use my card and PIN, and will not give my card or PIN to anyone. I understand if my share account goes below the required \$25 minimum or if I become 17 days or more past due on any AFFCU loan or VISA card, my AFFCU Debit Card will be blocked. I understand, if I am an AFFCU Basic Checking account holder, I must deduct \$1.00 for each debit transaction performed at a Point-Of-Sale (POS) terminal plus the transaction amount from my checking account. I understand I must deduct \$2.00 for each transaction, other than balance inquiries, from my account plus the amount transferred or withdrawn and any applicable surcharges when I use an ATM NOT owned or identified by AFFCU for free usage. A list of foreign ATMs recognized by AFFCU and the CO-OP Network is available on our website at [affcu.org](http://affcu.org) or by calling 410-584-7474 or 1-800-505-7476.

<b>Primary Signature</b> _____	<b>Date:</b> _____
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