

YOUR ECU DEBIT MASTERCARD

Instant access to your money couldn't be any easier. To get started, simply complete the debit card application to the right and mail back to us:

Edison Credit Union
Attn: Debit Card Application Processing
4200 East Front Street
Kansas City, MO 64120

An Edison Member Services Representative will process your application immediately and contact you about approval.

Using your ECU Debit MasterCard

Make purchases virtually anywhere without having to write out a check! Use your Edison Credit Union debit MasterCard anywhere MasterCard is accepted and at virtually any ATM. Call 816-231-3380, for details.

Transactions made at our **ATM at the 4200 East Front Street location** are **ALWAYS free** when you use your Edison card! Find an ATM near you in our surcharge-free CO-OP network of over 28,000 ATMs across the country, including 7-Eleven stores – by visiting www.EdisonCU.com. You can even access surcharge free ATMs through an iPhone application, text messaging and GPS. Four ATM withdrawals per month from your account are free!

ECU Debit MasterCard Tips

When using your ECU Debit MasterCard, make sure to *choose the credit option for all purchases*. When you choose "credit," you're allowed access to your full daily purchase limit. If you choose debit, then you're restricted to a lower limit.

When using your debit card, money is subtracted from your account and purchases should still be kept track of just as if you're writing a check.

WHAT'S MORE . . .

- Use your debit card at virtually every ATM available.
- Withdraw up to \$400 per day.
- Avoid carrying cash to make purchases.

DEBIT MASTERCARD APPLICATION

Date: ____/____/____

Applicant Information

Name: _____
Street Address: _____
City: _____ ST: _____ ZIP: _____
Home Phone: _____
Cell: _____
Account Number: _____
SSN: _____ - _____ - _____ DOB: _____
E-mail: _____
Employer: _____

Co-Applicant Information

Name: _____
Street Address: _____
City: _____ ST: _____ ZIP: _____
Home Phone: _____
Cell: _____
Account Number: _____
SSN: _____ - _____ - _____ DOB: _____
E-mail: _____
Employer: _____

Read the following agreement and sign below:

By signing below, the undersigned requests the described services and agrees to the terms and conditions governing the services, including any fees and charges. The undersigned agrees that all information is accurate and authorizes the financial institution to verify credit and employment history by any necessary means, including preparation of a credit report by a credit-reporting agency.

Applicant's Signature Date
 I received a copy of my ATM & Debit Card Rights & Responsibilities, and I agree to these terms.

Co-Applicant's Signature Date
 I received a copy of my ATM & Debit Card Rights & Responsibilities, and I agree to these terms.

OFFICIAL USE ONLY

Date received ____/____/____
Approved Yes No By _____
Processed by _____

Detach & Return Application