

**Do you need to pay for purchases or services When you don't have the cash? Don't want to charge it? For-got your checkbook?**

**HERE'S THE ANSWER!!!!**

Use your credit union VISA check card.

With a credit union Visa Check Card, payment is deducted automatically from your credit union share draft account. It's ideal for travel, and it is safer than cash!

**It's Convenient**

When you're ready to pay just present your check card, sign the sales slip and keep your receipt. That's it! You don't need to enter your Personal Identification Number (PIN). The amount is automatically deducted from your credit union share draft account and recorded on you monthly statement.

**A New, Easier Way to Shop**

A debit card works like a check but makes it easier for you.

The card is readily accepted, pay for purchases anywhere you see VISA symbol, more than 12 million locations worldwide, including department stores, restaurants, supermarkets, hotels and more.

It's safer than carrying cash, easier than writing a check, and unlike credit cards there is no monthly bill or finance charge.

A debit card also works like an ATM Card, at ATM machines you will be able to access your checking account for ATM use.

**ATM/VISA Check Card Application**

Please print clearly and complete all information and return to Credit Union in an envelope.

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

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

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

Address: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

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

**READ AND SIGN**

By signing below, I am applying for a CT Labor Dept FCU ATM/VISA Check Card. I understand that this is not a credit card and that the dollar amount of the purchases made with this card will be deducted from my share draft/checking account only. I authorize CLDFCU to verify the information provided above and to request a credit report if necessary. The CLDFCU Visa Check Card is available for qualified members only, if I do not qualify for the CLDFCU VISA Check Card, I request that CLDFCU issue me an CLDFCU ATM card. I agree to be bound by the Terms and Conditions of the Cardholder Agreement.

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

**FOR CREDIT UNION USE**

ACCOUNT# \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

**If applying for a Joint Account, joint cardholder must be joint owner of the account (s) to be accessed.**

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

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

Address: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Mother's maiden name: \_\_\_\_\_

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Signed: \_\_\_\_\_

Dated: \_\_\_\_\_