



**GERBER FEDERAL  
CREDIT UNION**

## DEBIT MASTERCARD APPLICATION

A Gerber FCU Debit MasterCard gives you access to your money 24 hours a day, every day. Use your card at ATMs displaying the Co-Op ATM, Plus, Pulse, Cirrus or Maestro logo to make deposits, withdraw cash and transfer funds between accounts. You can also use the Debit MasterCard at point-of-sale terminals throughout the U.S. conveniently located in grocery stores, malls, and shopping centers.

To use at an ATM: Insert your card, enter your PIN and follow the step-by-step instructions displayed on the screen. Be sure to save receipts from your ATM and purchase transactions so that you can enter the amounts into your checkbook. Visit [www.gerberfcu.com/locations](http://www.gerberfcu.com/locations) to find an ATM near you.

Access to your accounts will be yours in just two consecutive mailings. In the first, you will receive your Debit MasterCard. In the second, you will receive a 4-digit Personal Identification Number (PIN) which is assigned to your card only. Do not throw this information away, this PIN will allow you to access your financial accounts at an ATM. Protect your accounts and do not write your PIN on your card or keep in your wallet.

To change your PIN or for more information about your card, call Member Service at (231) 924-4880 option 2. It's easy to get your card, just complete this application and return to Member Service by mail or in-person.

Primary/Business Name:		SS #:	
Joint/Authorized Signer Name:		SS #:	
Mailing Address:			
City:	State:		Zip:
Home Phone:		Cell Phone:	
Email Address:			
Member Number:		Mother's Maiden Name:	

Issue card for: ☐ Primary Member ☐ Joint Member/Authorized Signer ☐ Both

This information is given to obtain the Gerber FCU Debit MasterCard and is true and complete. Gerber FCU may verify the information given and obtain further information from a consumer credit report to assist in the review process. Gerber FCU may withdraw the offer if unable to verify the information I provide, or if a current report reflects certain adverse circumstances. When I or someone I authorize uses the Gerber FCU Debit MasterCard, I agree to the terms and conditions of the agreement that governs the use of the Gerber FCU Debit MasterCard.

Primary/Owner Signature:	Date:
Joint/Authorized Signer Signature:	Date:

*Joint Signature required if Primary Owner is a minor (13-17 years).*