

ATM Card

Use your ATM Card to:

Withdraw Cash Check Balances
 Make deposits Transfer funds
 Make loan payments

It's Easy!

Use your Personal Identification Number (PIN) and your ATM Card. Each machine will prompt you step-by-step, guiding you through your financial transactions.

It's Safe!

Because each PIN is distinct and known only by you, your credit union accounts are kept safe and personal.

It's Convenient!

24/7 access at FREE ATM's worldwide through CO-OP Network means you're never far from your money!

Cash Limits: Online \$500.00
Offline \$250.00

Debit Card



With your share draft (checking) account, get the Debit Card; it acts like an ATM with the added feature of making purchases at merchants that accept either Mastercard or Visa!

When you make purchases, you enter your PIN (extra secure!) or sign your name on a purchase slip. The amount of the purchase is automatically deducted from your share draft account and will appear on your next monthly statement!

In addition, when you make purchases as a signature transaction you earn points with our SIR Rewards program. These points are redeemable for items such as merchandise, travel, gift cards & more!

Cash Limits: Online \$500.00/Offline \$250.00
Purchase Limits: Online \$1,000.00/Offline \$500.00

ATM CARD OR DEBIT CARD REFERRAL FORM: SIR FEDERAL CREDIT UNION

Instructions

Complete this referral form and return it to any employee or mail it to your Credit Union. If you already have a card, but need your Personal Identification Number (PIN), please provide the required information and check the appropriate box below. Completing this form does not mean that your Credit Union will approve you for an ATM/Debit Card. **This is a request for more information.**

Please Print Account Number:

Requesting:

- ATM Card Debit Card (need a checking)
 Pin Replacement ATM/Debit Card

1. _____
 Primary Member's Name

____/____/____ _____
 Social Security No. Mother's Maiden Name

 Street Address/P.O. Box

 City, State, Zip Code

 Home Phone Birth Date

 Work Phone Cell Phone

2. _____
 Joint Member's Name

____/____/____ _____
 Social Security No. Mother's Maiden Name

 Home Phone Birth Date

 Work Phone Cell Phone

Please Read and Sign Below

I/we agree to be bound by all terms and conditions governing the use of the ATM or debit Card as outline in the EFT Disclosure and Fee Schedule that will be provided to me/us by my credit union as soon as this form is received and approved.

X _____
 Primary Member's Signature

 Date

X _____
 Joint Member's Signature
 (Both signatures are required on joint Accounts.)

 Date

SIR Federal Credit Union
 490 E. US 41 Hwy.
 Negaunee, MI
 49866



(906)475-4149
 (906)475-5131 fax

www.sirfcu.com

Teller _____ Branch _____

rev 09/09