CUMONEY[®] Visa[®] Everyday Spend Card

Fill out the information below to receive your CUMONEY reloadable debit card.

Account Number	Email Ad	dress	
	Middle In	nitial	Last Name
Social Security Number	Date of Birth		
Mother's Maiden Name	-		
Address			
City	State	Zip Code	e
[] Home or [] Mobile Ph	none Wor	k Phone	

I agree that I will be bound by the terms of the CUMONEY prepaid debit card agreement and disclosure which will be furnished to me. I agree to surrender the card upon demand and authorize the credit union to obtain credit reports in connection with this application and for any update or renewal of the card.

Signature	Date	
	MONEY ®	

To receive your card faster, print and complete this form, then scan and email it to <u>memberservice@maconbibbecu.org</u>. You may also fax it to 478-751-7044 or turn it in at the branch. You will receive the card in 5 to 10 business days. Your card will not have funds available until you call 478-219-1163 or 478-219-1162 and request a funds transfer from your savings account to your new card.