

VISA CHECK CARD / ATM APPLICATION

This application can be used to apply for the Mutual Bank VISA Check Card or ATM Card.

Each Applicant must fill out his/her own application.

Please print application, then fill out clearly by printing or typing.

Applicant Name _____ SSN _____ - _____ - _____

Date of Birth ____ / ____ / ____ Mother's Maiden Name _____

Address _____

City _____ State _____ Zip _____ How long at address: _____ yrs

Telephone (Day) _____ (Evening) _____

Employer _____ How long with employer: _____ yrs

I wish to access the following accounts:

Primary Checking Account # _____

2nd Checking Account # _____ (for ATM access only)

Money Market Account # _____ (for ATM access only)

Statement Savings Account # _____ (for ATM access only)

Authorization: By signing below, I am applying for a Mutual Bank VISA Check Card. I understand this is not a credit card and that the dollar amount of the purchases made with this card will be deducted from my Mutual Bank primary checking account only. I authorize Mutual Bank to verify the information provided above and to obtain any other information concerning my credit report. The Mutual Bank VISA Check Card is available for qualified customers only. Other requirements may apply.

I understand and agree to be bound by all applicable terms including those of the VISA Check Card Agreement and the Electronic Funds Transfer Disclosure.

Signature _____ Date _____

Please print this page, complete and sign the application and bring it to your nearest Mutual Bank location!