

# MasterCard Debit Card Request

Complete this form to request a MasterCard debit card. Completed forms can be mailed to 62 S. Elmwood Ave., Buffalo, NY 14202.

Name (first/middle/last): \_\_\_\_\_

Account number: \_\_\_\_\_ Last four of your SSN: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home telephone #: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

**Your current address must be on file at the Buffalo Metropolitan Federal Credit Union!**

Debit card online requests cannot be completed if a current address is not on file at the Credit Union. You may change your address by one of the following methods:

- Log into your online banking account, go to User Profile tab, and select Change Address.
- Complete online Address Change form available at BfloMetroCU.org, under Information Desk.

**By selecting one of the options below, I acknowledge:**

- \$2.00 per month will be assessed to my savings account on the last business day of the month. *Teen and student checking accounts are not assessed the \$2.00 per month fee.*
- \$2.00 withdrawal fee and \$.25 balance inquiry fee at non-Credit Union and non-Allpoint ATM locations.
- Receipt of the disclosure Electronic Funds Transfer Agreement at account opening. View the Electronic Funds Transfer Agreement at BfloMetroCU.org, go to Information tab, and select Membership Booklet.

**I would like to request a (check on box):**

MasterCard debit card – This is my first request for a debit card

Replacement card – Check a box for each of the steps below

1. Please debit the \$10.00 replacement card fee from my  savings  checking

2.  I am requesting a new card number (ex: lost/stolen card)

I am requesting the same card number (ex: card doesn't work when swiped)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employee Initials: \_\_\_\_\_

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**Buffalo Metropolitan Federal Credit Union**

Banking at its Best

62 S. Elmwood Ave., Buffalo, NY 14202 ▪ 716.847.6960 ▪ BfloMetroCU.org