



GTFCU Visa Check Card/ATM Card
APPLICATION FOR MINORS (age 13-17)

Fax application to 512-323-4880

*** Please CHECK card you are applying for ***

GTFCU CHECK CARD AGGIELAND CHECK CARD SUPERCAT CHECK CARD REGULAR ATM CARD

Account Number Minor's Birth Date

Minor Cardholder's Name

Mail card to:

(Branch delivery not available—PO BOXES not accepted for UPS Delivery)

Address

City State ZIP

*** Please select delivery method ***

Regular Mail (5 to 7 days) Instant Issue in person (\$10 fee) Next Day UPS (\$35 fee) 2-Day UPS (\$15 fee)
Free if sending to mailing address

NEXT DAY AND 2-DAY REQUESTS MUST BE SUBMITTED BY 1PM FOR SAME DAY SERVICE. UPS SATURDAY DELIVERY AVAILABLE FOR AN ADDTL FEE

*IMPORTANT INFORMATION ABOUT YOUR MINOR'S CARD

- PARENT IS RESPONSIBLE FOR ACTIVATING MINOR'S CARD AND CHOOSING THE PIN # DURING ACTIVATION
-THERE WILL BE A \$200 DAILY SPENDING/WITHDRAWAL LIMIT FOR ALL PIN # PURCHASES/WITHDRAWALS
-THERE WILL BE A \$500 DAILY SPENDING LIMIT FOR SIGNATURE/ONLINE/PHONE PURCHASES (CHECK CARD ONLY)
-SOME MERCHANTS MAY ASK THE MINOR FOR A PICTURE I.D. BEFORE ALLOWING A PURCHASE
-SOME ONLINE MERCHANTS WILL ONLY ACCEPT A CHECK CARD IF THE CUSTOMER IS 18 YEARS OF AGE OR OLDER
- PARENT IS RESPONSIBLE FOR ALL PURCHASES IF MINOR ALLOWS ANOTHER PERSON TO USE THE CARD OR PIN #
-IF MINOR LOSES THE CARD OR IF THE CARD IS STOLEN, PARENT IS RESPONSIBLE FOR NOTIFYING GTFCU
-PARENT IS RESPONSIBLE FOR REPORTING ANY FRAUDULENT TRANSACTIONS ON MINOR'S CARD TO GTFCU

Subject to the approval of Greater TEXAS /Aggieland CU, I request a check/ATM card on behalf of a minor. By activating the card on behalf of the minor, I agree that card possession and all card usage will be bound by the terms and conditions of the GTFCU ATM and Visa Check Card Agreement (hereafter referred to as the "Agreement") which will accompany the card. By signing below, I agree that all transactions conducted with the card by the minor shall have my approval regardless of my ability to physically accompany the minor during any particular transaction. By signing below, I agree to monitor the minor's card usage regularly and I agree to protect the card and PIN from unauthorized usage. I understand and agree that on the minor's 18th birthday the card and it's usage will remain my responsibly according to terms of this application and of the Agreement for a period of 30 days or until the minor completes and signs a new signature card and card application; furthermore if the minor fails to complete and sign a new signature card and card application at least 30 days after the minor's 18th birthday GTFCU will close down the card. By requesting a card mailer to an alternate address, the applicant agrees that the existing GTFCU savings/checking account mailing address will be altered for a period of 3 to 5 business days to reflect the alternate mailing address on this form; the applicant agrees to receive all other mail from GTFCU (including statements) at this alternate address for a period of 3 to 5 business days or until the card is delivered. *By signing below, I state that I have read the "IMPORTANT INFORMATION ABOUT YOUR MINOR'S CARD" section of this application.

Parent/Guardian Signature Date

Sent/Faxed by Ordered by Date Ordered Fee