

No more rushing to your financial institution before it closes...writing checks for cash...or running out of cash when you're on the road or just out of town. With SVMCFCU Cash Card you can electronically conduct routine banking transactions whenever—and wherever—it's convenient for you!

Where can I use my SVMCFCU Cash Card?

Your credit union is a member of NYCE and the CIRRUS networks, giving you access to over 250,000 ATM locations throughout the United States and world-wide. You may use your card at an ATM location that displays the logo of these networks. So, no matter where you travel, you can make instant cash withdrawals!

What transactions can I perform with my ATM card?

- Withdraw cash from your Checking account at ATMs.
- Withdraw funds from your Checking account to make purchases at places that will accept your card and PIN.
- Transfer funds between your designated Savings and Checking accounts.
- Check your account balances.

What is a Personal Identification Number (PIN)?

The most important aspect of 24-hour banking is your Personal Identification Number (PIN). The PIN is a four (4) digit numeric identifier **known only to you**. When you insert your card into an ATM, you immediately will be instructed to enter your PIN. You will not be able to complete your transaction unless your PIN is entered correctly. This is an important safety feature. No one else can use your card unless they know your PIN—so keep it to yourself.

A PIN will be generated automatically for your personal ATM card. This PIN will be forwarded to you shortly before your ATM card is mailed. For your own protection, NEVER write your PIN on your card or card carrier.

What if I am a joint-account holder?

If your account is one of joint ownership, each individual owner may have access to the same accounts. However, each account holder must apply for and receive their own ATM card and PIN.

ST. VINCENT'S MEDICAL CENTER FEDERAL CREDIT UNION CASH CARD (ATM Application)

PLEASE PRINT

Name		
Social Security Number		
Address		
City	State	Zip
Business Phone	Home Phone	

Your Account Number

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If approved, I agree to abide by the terms and conditions set forth in the ATM Cardholder Agreement.

Signature

Detach the application at the perforation; fold, staple and mail.