

The Debit Card Amendment form must be completed when you want to change your debit card service by adding, removing or replacing a cardholder. **A cardholder must be a joint owner and must be at least 13 years old to have a card in his/her name. Remember, debit card service allows only two cards on the account.**

_____ FIRST NAME	_____ M.I.	_____ LAST NAME	() _____ HOME PHONE NUMBER
_____ ACCOUNT NUMBER			() _____ WORK PHONE NUMBER

INSTRUCTIONS: If you want to add a second cardholder to your account, complete Section 1 only. If you already have a second cardholder on your account and you want to remove this person, complete Section 2 only. If you want to replace this person, complete Section 3 only. **The member and joint owner-cardholder(s) must sign below.**

SECTION 1 - Adding a Second Cardholder: This cardholder must be a joint owner and at least 13 years old. **THIS PERSON MUST SIGN BELOW. NO PIN REQUIRED.** Please note it will take approximately two weeks to receive the second card.

SECOND CARDHOLDER NAME (as it will appear on the card)

SECTION 2 - Remove the Second Cardholder:

Please note: A new card number will be issued with the PIN indicated below. It will take approximately two weeks to receive your new card(s). **You must select one option below** or cards will be closed immediately.

Close existing card number immediately. I understand that I will not have debit card access to my funds until my new card number is received.

Leave existing card number open until new card number is received and activated. The joint owner whose access is being removed will have card access to this account when choosing this option until the member's existing card is closed.

PIN REQUIRED
Note: Any merchant that automatically bills your debit card needs to be notified of your new card number to prevent disruption of service.

SIGNATURE REQUIRED BELOW

SECTION 3 - Replace the Second Cardholder:

Remove _____
(name of cardholder being removed)

Replace with _____
(name of new cardholder)

Close existing card number immediately. I understand that I will not have debit card access to my funds until my new card number is received.

Leave existing card number open until new card number is received and activated. The joint owner whose access is being removed will have card access to this account when choosing this option until the member's existing card is closed.

PIN REQUIRED
Note: Any merchant that automatically bills your debit card needs to be notified of your new card number to prevent disruption of service.

SIGNATURE REQUIRED BELOW

SECTION 4 - Read and Sign. Both the member and joint owner(s) - cardholder(s), if applicable, must sign.

I/We hereby want to make changes to my/our debit card privileges with my/our PSECU Checking Shares. I/We agree that my/our use of the debit card signifies my/our acceptance of the rules, regulations, agreements, and disclosures that are associated with Checking Shares and the debit card. I/We also agree that PSECU may add or discontinue services and fees for services and make other changes to these agreements from time to time. I authorize any person, association, firm, corporation, or personnel office to furnish information concerning me or my affairs and any joint owner designated as a cardholder, including a credit report, upon request of this credit union. I understand that I and any designated cardholder have the right to request, in writing, the nature and scope of the credit unions investigation. Should PSECU receive any debit card or other debit transaction that is greater than the available balance of funds in Checking Shares, PSECU may, at its sole option and without regard to which cardholder completed the transaction, either settle the transaction and add the excess to the Personal Service Loan of any cardholder or withdraw sufficient funds from any other share balances owned by me or any designated cardholder. The exercise by PSECU of any overdraft option to a PSL constitutes authorization to any of the signees to advance funds from my Personal Service Loan regardless of whether the joint account holder is also a party to the Personal Service Loan. Any negative balance created in my/our checking account by the use of this card shall bear interest at the highest unsecured loan rate offered by PSECU until paid in full. I and all owners agree to be liable for any negative balances including fees and costs, created by the actions of any joint owner, in any jointly held account. Any financial service provided by PSECU may be used for any transaction permitted by law. You agree that you will not use any service for any transaction that is illegal under applicable federal, state or local law. You agree that illegal use of any financial service will be deemed an action of default or breach of contract. Use of any financial service in a manner not permitted by law may cause that service or related services to be terminated at PSECUs discretion. You further agree, should illegal use occur, to waive any right to sue PSECU for such illegal use or any activity directly or indirectly related to it. Additionally, you agree to indemnify and hold PSECU harmless from any suits or other legal action or liability, directly or indirectly, resulting from such illegal use. **PSECU reserves the right to decline any transaction that we consider fraudulent, suspicious, or illegal. PSECU will not knowingly authorize charges related to online gambling.**

_____ MEMBER'S SIGNATURE	_____ DATE
_____ JOINT OWNER - CARDHOLDER'S SIGNATURE	_____ DATE
_____ JOINT OWNER - CARDHOLDER'S SIGNATURE	_____ DATE

SELECT PIN ONLY IF YOU COMPLETED SECTION 2 OR SECTION 3
Your debit card PIN will be required for transactions at an ATM. Select a PIN that is not easily identified with you, such as your Social Security number. Please do not use your Member Account PIN, symbols, numbers between 0000 and 0009, repeating numbers (1111, 2222, etc.), or consecutive ascending or descending numbers (1234, 4321, for example). Write your PIN in the spaces below and note it for your reference. PSECU does not keep your PIN on file.

 **Record Debit Card PIN:** _____