United State Bank School Spirit Debit Card Request

Request Date:					
Cardholder Information #	<u>.</u> 1:				
, , , , , ,					
Mailing Address:					
Phone #:	SSM #·	Birth Date:			
Secondary Phone #		Bitti Date.			
Current Debit Card #:					
Card Limits: Online Daily \$; POS Daily \$; Credit Card Daily \$			
Linked Accounts: DDA:	Savings:				
Cardholder Information #					
Name (as embossed on card):_					
Moiling Address					
Maning Address.					
Phone #:	SSN #:	Birth Date:			
Secondary Phone #					
Current Debit Card #:					
		; Credit Card Daily \$			
Linked Accounts: DDA:	Savings:				
Selected School Spirit Car		•			
Highland Cougars: N. Shelby Raiders:					
N. Sileiby Raiders.	S. Shelby Cardinals: _				
PIN Request (indicate type	of DIN).				
Card # 1: PIN Mailer:	·				
Card # 2: PIN Mailer:					
					
By signing below, I/We hereby	v request United State Bank	replace our USB Debit Card(s) with t	he indicated School		
	•	ate \$5.00 per card order request, which			
our school of choice.	-	-			
Method of Payment (circle or	ne): Cash / Check / Deduc	ted from Account #			
Condhaldan Sianatura	Dota	Condhaldon Signatura	Data		
Cardholder Signature	Date	Cardholder Signature	Date		
For Bank Use Only: Request Taken By / Date: Ordered By / Date on Shazam Access:					
Premier Updated By / Date: PIN Request Ordered By / Date:					

Edina	Ewing	Lewistown	Palmyra	Shelbina
660-397-2408	573-209-3223	866-671-4148	573-769-4897	573-588-7781
		Member FDIC		