VISA DEBIT CHECK CARD DISCLOSURE

In consideration of the issuance of a VISA Debit Check Card to the undersigned cardholder(s) by Fidelis Catholic Federal Credit Union, the undersigned cardholder(s) agrees to the following terms and conditions.

All VISA Debit Check Card, ATM (Automated Teller Machine) and POS (point of sale) transactions will have first priority for payment from the share draft account. Any share drafts written for $100.00 or less on which the VISA Debit Check Card number has been properly noted will be given second priority. After the above items have been paid, all remaining drafts will be processed. The Credit Union has authorization to transfer funds from other accounts held with this Credit Union when drafts presented for payment cannot be paid from the share draft account balance or from an approved Overdraft Line of Credit. The VISA Debit Check Card does not give cardholder(s) the right to defer payment of share drafts nor to write drafts that will overdraw the account except, as additional funds are available. If you have an Overdraft Line of Credit and it advances to cover share drafts, VISA Debit Check Card purchases and/or ATM withdrawals the advance could be made in multiples of $100.00. The Credit Union has the right to modify these agreements and any of the items applicable to the use of the VISA Debit Check Card by mailing written notice to the cardholder(s) address of record, and may cancel this agreement at any time with or without cause, without liability to the Credit Union. The first seven (7) ATM withdrawals, per statement period, are free. A $2.00 fee for each additional ATM withdrawal during the same statement period will be charged. ATM fees may be incurred at ATM's owned by other financial institutions, corporations or companies of which Fidelis Catholic Credit Union will not be liable for.

The Credit Union reserves the right to offset shares in the event the Credit Union incurs a monetary loss due to cardholder(s) negligence with the VISA Debit Check Card. This right of offset does not apply to legitimate disputed charges.

I (we) hereby acknowledge receipt of the VISA Debit Check Card Disclosure and the Electronic Funds Transfer (EFT) Disclosure and I (we) agree to abide by all the provisions of these Disclosures. I (we) also request a VISA Debit Check Card to be issued in the name(s) listed below.

__________________________________________________
Member's Account Number

__________________________________________________
Name Embossed on Card

__________________________________________________
Primary or Joint Name (Print)            Primary or Joint Name (Signature)    Date

__________________________________________________
Fidelis Employee Signature

Date