

Wolverine Bank ATM Card Application

Applicant: _____ SS#: _____

Joint Applicant: _____ SS#: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Business Phone: _____

Email Address: _____

Have you ever been issued an ATM card from Wolverine Bank?

No Yes, Card Number: _____

If yes, please check one: Close this account Keep this account open

I/We would like to access the following account(s) with my/our Wolverine Bank ATM Card(s)

Checking Account - Account Number: _____

Savings Account - Account Number (ATM access only): _____

Money Market - Account Number (ATM access only): _____

You may call 989-631-4280 or 800-968-4280 for instructions on how to reset your PIN to a four-digit number of your choosing.

Your signature(s) on this form will constitute an agreement that use of the card will be governed by our Electronic Funds Transfer Service Agreement.

Applicant's Signature: _____ Date: _____

Joint Applicant's Signature: _____ Date: _____

This section for Wolverine Bank use only.

Card Holder Account Number: _____

Joint Card Holder Account Number: _____

Daily Limit: ATM \$ _____ POS \$ _____ Total \$ _____

Visa Check POS \$ _____ Stand In \$ _____

Received By: _____ Input By: _____ Date: _____