

# STAR <sup>SM</sup> / DEBIT MASTERCARD <sup>®</sup> APPLICATION



- STAR Card  
 STAR/Debit MasterCard\*

ENTER YOUR REQUESTED PIN:  
For Debit Card Orders Only

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(Please no numeral 0, letter O or letter Z. Please select all letters or all numbers.)



\*If you are upgrading from a STAR ATM Card to a STAR/Debit MasterCard, your STAR ATM Card will be canceled when the new STAR/Debit MasterCard is activated.

**IMPORTANT:** Read Cardholder Agreement, and remember to sign your application.

## PRIMARY APPLICANT

LAST NAME, FIRST NAME, MIDDLE INITIAL

STREET ADDRESS

APARTMENT NO./P.O. BOX NO.

EMAIL ADDRESS

CITY, STATE, ZIP CODE

CURRENT EMPLOYER

DAY TELEPHONE

( )

EVENING TELEPHONE

( )

## SECOND APPLICANT

LAST NAME, FIRST NAME, MIDDLE INITIAL

\*If you choose to authorize joint access on your STAR/Debit Card, you must:

- have your RFCU Checking and/or RFCU Savings Account set up as a Joint Account, and
- complete the "Second Applicant" section above. If the Second Applicant section is completed, 2 (two) STAR/Debit Cards will be issued and sent to the primary owner's address.

## ACCOUNT INFORMATION

If this is a joint application, be sure the accounts listed are the applicant's joint accounts.

TYPE	ACCOUNT NUMBER
Checking 101	
Savings 201	

The daily POS/withdrawal limit for Debit MasterCard is \$1,000. The daily limit for STAR ATM is \$300.

I/We hereby acknowledge that I/we have received a copy of your STAR CARD Cardholder Agreement and Disclosure Statement and that I/we have read, understand and agree to be legally bound by the terms and conditions of such Agreement. I/we also acknowledge receipt of the Disclosure Statement informing me/us of my/our rights under the Electronic Fund Transfer Act. I also understand that the STAR/Debit MasterCard is available to qualified applicants only. The STAR ATM Card will be issued to applicants who do not meet STAR/Debit MasterCard requirements.

X \_\_\_\_\_ X \_\_\_\_\_  
 APPLICANT'S SIGNATURE DATE SECOND APPLICANT'S SIGNATURE DATE

\_\_\_\_\_  
 SOCIAL SECURITY NO. DATE OF BIRTH SOCIAL SECURITY NO. DATE OF BIRTH

## CREDIT UNION USE ONLY

### Special Handling

- (P) Pull Card

PREPARED BY	DATE
APPROVED BY	DATE

CA: \_\_\_\_\_ PIN: \_\_\_\_\_ EM: \_\_\_\_\_ Date: \_\_\_\_\_

PNG: \_\_\_\_\_ Date: \_\_\_\_\_



[www.rutgersfcu.org](http://www.rutgersfcu.org)

▶ Detach Here, Fold, Tape And Mail Or Bring To The Credit Union ▶

## STAR<sup>SM</sup>/Debit MasterCard® Cardholder Agreement

I, the undersigned, in consideration of Rutgers Federal Credit Union issuing me a STAR/Debit MasterCard, hereby agree to be legally bound by the following terms and conditions. As used in this Agreement, the terms “you,” “your,” and “Credit Union” refer to the Rutgers Federal Credit Union.

**1. Account And Uses Of STAR Card/Debit MasterCard.** I have the account(s) including such Checking and Savings with you set forth on my application form attached to this Agreement. I hereby request that you issue to me a STAR/Debit MasterCard to be used in connection with such accounts as described in this Agreement.

I understand that I may use my STAR/Debit MasterCard with my Personal Identification Number (PIN) at Automated Teller Machines throughout the United States and in certain foreign countries which bear the PLUS System name and logo to (1) withdraw cash from my account(s); (2) effect transfers to or from my accounts; (3) make or arrange for deposits to my accounts; (4) receive information regarding the balance in my accounts. I may also use the STAR/Debit MasterCard to perform any of these transactions at any ATM bearing the MasterCard logo.

I further understand that I may use my STAR/Debit MasterCard at any retail establishment (“Merchant”) where STAR CARDS are accepted or where MasterCard is accepted (STAR/Debit MasterCard only) to purchase goods or services and/or obtain cash where permitted by the Merchant (“Purchase”). If I use my STAR/Debit MasterCard to make a Purchase, I shall be requesting you to withdraw funds in the amount of such Purchase (including any cash received from the Merchant) from the primary transaction account designated on my application form and directing or ordering you to pay such funds to the Merchant. If I only have a Savings Account, I understand that I may not use my STAR to do Point of Sale transactions. I acknowledge that a PIN is not used in a MasterCard Point of Sale Purchase, and therefore I agree to take all reasonable precautions that no one else has access to my STAR/Debit MasterCard.

**2. Use Of Personal Identification Number (PIN) With STAR/Debit MasterCard.** I

understand that a STAR ATM or PLUS SYSTEM® ATM is an automated teller. It can and will perform many of the same tasks as a human teller. I acknowledge that the PIN which I use with the STAR/Debit MasterCard is my signature, identifies the bearer of the CARD to the STAR ATM or PLUS System ATM or other network ATM, and authenticates and validates the directions given just as my actual signature and other proof identify me and authenticate and validate my directions to the human teller. I also understand that a Merchant which accepts the STAR/Debit MasterCard for a Purchase transaction may have an electronic terminal (Merchant-operated or self-service) which requires the use of my PIN, and when my PIN is used at a Merchant’s terminal, it will authenticate and validate the directions given just as my actual signature will authenticate and validate my directions given to you. I acknowledge that my PIN is an identification code that is personal and confidential and that the use of the PIN with the STAR/Debit MasterCard is a security method by which you are helping me to maintain the security of my account(s). I agree to keep my PIN separate from my STAR/Debit MasterCard and agree not to keep my PIN in my purse or wallet along with my card. Therefore, I AGREE TO TAKE ALL REASONABLE PRECAUTIONS THAT NO ONE ELSE LEARNS MY PIN.

**3. Liability For Unauthorized Transactions.** I agree to contact you at once if I believe the STAR/Debit MasterCard issued to me or my PIN has been lost or stolen or money is missing from my account(s). I also agree that if my monthly statement shows transactions which I did not make and I do not contact you within 60 days after the statement was mailed to me, I may not get back any money lost after that time. I AGREE THAT IF I GIVE MY STAR/Debit MasterCard(s) AND PIN TO SOMEONE ELSE TO USE, I AM AUTHORIZING THEM TO ACT ON MY OWN BEHALF, AND I WILL BE RESPONSIBLE FOR ANY USE OF THE CARD(S) BY THEM.

**4. Foreign Transaction Fees.** Purchases, cash advances and cash withdrawals made in foreign currencies will be debited from your account in U.S. dollars. The exchange rate used to convert foreign currency transactions to U.S. dollars is either a government-mandated exchange rate or a wholesale exchange rate and is selected by MasterCard. The rate MasterCard uses for a particular transaction is the rate MasterCard selects for the applicable currency on the day of the transaction is processed. This rate may differ from the rate applicable on the date the transaction occurred or was posted to your account.

A fee of up to 1% will be charges on all transactions completed outside of the United States where the cardholder’s country code differs from the merchant’s country code. In addition, a fee of up to 1% will be charged on all transactions completed in a foreign currency. All fees are calculated based on the transaction amount after it is converted to U.S. dollars. These fees are charged except where excluded.

**5. Contact Information.** I agree to contact the STAR SERVICE IMMEDIATELY if I believe the STAR/Debit MasterCard issued to me or my PIN has been lost or stolen, or that an unauthorized transfer or Purchase from any of my accounts has occurred or might occur, by phoning and by confirming such information in writing to you at:

Rutgers Federal Credit Union  
100 College Avenue • New Brunswick, NJ 08901  
(732) 932-7645 or (800) 543-5073

**6. Charges.** Deposit, transfer, balance inquiry and Point of Sale transactions are free. There is a \$5.00 replacement fee for ATM/Debit Cards. I agree to pay the service charges or transaction fees, which may be imposed or charged by you from time to time.

**7. Deposits.** I agree that when I make a deposit at a STAR ATM that you have the right to verify the deposit before you make the money available to me. If I deliver cash, checks or other items to STAR ATM, I understand and acknowledge that the funds from my deposit may not be available for immediate withdrawal and that the availability of my deposit shall depend on your rules and regulations regarding the particular account in which I am making a deposit, the items that I am depositing and whether the deposit is made at a STAR ATM that is owned by you or another financial institution. I also understand and acknowledge that not all STAR ATM(s) may accept deposits, and some STAR ATM(s) may limit the amount of funds that may be deposited and that you may not control these limits.

**7. Liability.** If the STAR/Debit MasterCard is issued to a joint account, we agree to be jointly and severally liable under the terms of this Agreement and the agreement for such an account. I agree that if I make deposits to my account(s) with items other than cash (checks, drafts, or other items) and you make funds available to me from such deposits prior to their collection, you may deduct from my account(s) the amounts of such funds that are not collected or if the funds in my account are insufficient at such time. I will promptly pay to you any amount of such funds that are not collected.

**9. Amendment Of This Agreement.** I agree from time to time you may amend or change the terms of this Agreement, including amendments or changes to add further STAR/Debit MasterCard services or to amend or change the charges for these services. You may do so by notifying me in writing of such amendments or changes, and my use of the STAR/Debit MasterCard after the effective date of such amendment or change shall constitute my acceptance of and agreement to such amendment or change.

**10. Ownership.** I agree the STAR/Debit MasterCard is your property, and I will surrender it to you upon your request. I agree to surrender to the credit union my STAR/Debit MasterCard should I cause my account to go into a negative status more than 2 (two) times because of misuse. I agree that the STAR/Debit MasterCard is non-transferable.

**11. Collection Costs.** If I fail to pay any amount when due, I must pay all of the credit union’s costs of collection, including the fees of the credit union lawyers.

**12. Signature.** If you use the Card, the credit union can withdraw funds from my account without a signed withdrawal order.

**13. Termination.** The credit union may cancel this Agreement and my use of the STAR/Debit MasterCard at any time WITHOUT NOTICE. I may cancel this Agreement by returning the Card to the credit union with written notice of cancellation. Termination of service will be effective from the first business day following receipt of my written notice. Termination of this Agreement will not affect the rights and responsibilities of the parties under this Agreement for transactions initiated before termination.

**14. Disclosures.** I hereby acknowledge receipt of the disclosure statement informing me of my rights under the Electronic Funds Transfer Act and receipt of a copy of this agreement.

## STAR<sup>SM</sup> CARD Disclosure Agreement

The purpose of this Disclosure Statement is to inform you of certain rights that you have under the Electronic Funds Transfer Act.

**1. STAR ATM(s) Services.** You may use your STAR Card with your Personal Identification Number (PIN) at STAR ATM(s) located throughout the United States to conduct any of the following transactions for each of the accounts you have requested to be accessed by your STAR Card:

- Withdraw cash from:
  - your Checking Account
  - your Savings Account
- Transfer funds:
  - between your Checking and Savings Account
- Obtain available balance(s) from:
  - your Checking Account
  - your Savings Account
- Currently, deposit transactions are only accepted from STAR ATM(s) located in NJ, PA, MD and DE. You may deposit cash, checks or drafts to:
  - your Checking Account
  - your Savings Account

We wish to inform you that some STAR ATM(s) located in these areas may only provide access to the accounts you have designated as your primary Transaction Checking Account. NOT ALL STAR ATM(s) MAY ACCEPT DEPOSITS. THERE MAY ALSO BE LIMITS ON THE AMOUNT OF FUNDS WHICH YOU MAY DEPOSIT IN CERTAIN STAR ATM(s).

**2. PLUS SYSTEM® Services.** PLUS SYSTEM® automated services may be added at a later date available at PLUS SYSTEM®.

- Withdraw cash from:
  - your Checking Account
  - your Savings Account
- Transfer funds:
  - between your Checking Account
  - Savings Account

These are the present services. Other services may be provided in the future. This Agreement is applicable to the accounts that are the primary account of each party at your written request.

**3. Other ATM Network Access.** STAR may be available at other ATM networks to grant access to such arrangements are made and are not available at that time.

**4. Purchase Transactions.** You may use your STAR/Debit MasterCard at any STAR/Debit MasterCard Checking Account, at any STAR/Debit MasterCard Checking Account in order to purchase goods or services from the Merchant (“Purchase”) if permitted) will be deducted from the STAR Card, your STAR/Debit MasterCard Checking Account in the amount of the purchase. I agree to pay to such Merchant. Any fees assessed by the STAR/Debit MasterCard Checking Account.

**5. Limitations On The Use Of STAR/Debit MasterCard(s).** PLUS SYSTEM® ATM(s), PLUS SYSTEM® ATM(s) to use to withdraw up to \$300 amount you may withdraw up to \$300 each business day and end of three-day holidays, are controlled on the frequency of use of the STAR/Debit MasterCard(s) revealed for security reasons. The daily withdrawal (or purchase) amount, you do not enter the receipt provided by the STAR/Debit MasterCard(s) will notify you of the denial. Attempts to exceed the limit of the STAR/Debit MasterCard(s) ATM. The number of attempts to use the STAR/Debit MasterCard(s) ATM for security reasons.

**6. Contact Information.** If you believe that an unauthorized transaction may occur, please contact the STAR SERVICE IMMEDIATELY at (732) 932-7645 or (800) 543-5073. 100 College Avenue, New Brunswick, NJ 08901. A new card may be issued to you if your STAR/Debit MasterCard is lost or stolen. After such time, if you attempt to use the STAR/Debit MasterCard(s) ATM or PLUS SYSTEM® ATM(s), you may be liable for any unauthorized transactions.

**7. Charges For Transactions.** STAR/Debit MasterCard(s) time to time and to charge you for the use of the STAR/Debit MasterCard(s) will be provided to you at the time of assessment.

**8. Deposit Information.** Deposits to your STAR/Debit MasterCard(s) according to the rules and conditions of the STAR/Debit MasterCard(s) policies, which are contained in the STAR/Debit MasterCard(s) Funds Availability Act (“Funds Availability Act”) will be available upon request. You may request a STAR/Debit MasterCard(s) removed from the STAR/Debit MasterCard(s) account. “You may deliver cash, checks or drafts to any STAR/Debit MasterCard(s) account. You may not deliver cash, checks or drafts to any STAR/Debit MasterCard(s) account in New York or West Virginia.”

If the amount of the funds contained in your deposit envelope differs from the amount you have indicated to the STAR ATM, we will adjust your account(s) to reflect the amount we have received and advise you of any difference.

**9. Record Of Transaction.** You will receive a printed receipt for each STAR ATM, PLUS SYSTEM® ATM or Purchase transaction at the time of the transaction. You will receive a monthly statement showing the status of your account(s), transactions made during the past month and any changes we may impose for such services or transactions.

**10. Liability For Unauthorized Transactions.** CONTACT US OR THE STAR SERVICE IMMEDIATELY IF YOU BELIEVE YOUR STAR CARD OR PIN HAS BEEN LOST OR STOLEN. Telephoning and writing us at Rutgers Federal Credit Union is the best way of keeping your losses to a minimum. You could lose all your money in the account(s) if you take no action to notify us of the loss of your STAR Card or PIN. If you notify us of the loss, your liability will be as follows:

- a) If you contact us within two business days of the loss or your discovery of the loss, you can lose no more than \$50 if someone used your STAR Card and PIN without your permission.
- b) If someone used your STAR Card and PIN without your permission, you could lose as much as \$500 if you do NOT contact us within two business days after you learn of the loss and we can prove that we could have prevented the loss if you had contacted us.
- c) Also, if your monthly statement shows transfers or purchases that you did not make and you do not contact us within 60 days after the statement was mailed to you, you may not get back any money lost after 60 days, if we could have prevented those losses.

**11. Business Day.** Our business days are Monday through Friday. Holidays are not included.

**12. In Case Of Errors Or Questions About Your Transactions.** Telephone us at (732) 932-7645 and write to Rutgers Federal Credit Union at: 100 College Avenue, New Brunswick, NJ 08901. Contact us immediately if you think your statement or receipt is wrong or if you need more information about a transaction listed on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. You must provide us with the following:

- a) Tell us your name, account number and STAR Card number;
- b) Describe the error or the transaction you are unsure about, and explain as clearly as you can why you need more information; and
- c) Tell us the dollar amount of the suspected error.

If you tell us orally, we require that you send us your complaint or question in writing within 10 business days. We will tell you the results of our investigation within 10 business days for STAR ATM or PLUS SYSTEM ATM transactions, or 20 business days for Purchase transactions or any transactions that were made outside of the United States, Commonwealth of Puerto Rico or any political subdivisions thereof ("international transaction") after we hear from you and correct any error promptly. If we need more time, however, we may take up to 45 days for STAR ATM transactions to investigate your complaint or question. If we decide to do this, we will recredit your account within 10 business days if it is a STAR ATM or PLUS SYSTEM ATM transaction, or 90 business days if it is a Purchase or international transaction for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete the investigation. If we do not receive your complaint or question in writing within 10 business days, we may not recredit your account.

If we decide that there is no error, we will send you a written explanation within three business days after we finish our investigation. You may ask for copies of documents that we used in our investigation. If we credit your account with funds while investigating an error, you must repay those funds to us if we conclude no error has occurred.

**13. Disclosure Of Account Information.** We will disclose information about your account or the transactions you make to third parties:

- a) where it is necessary to complete transactions;
- b) to verify the existence and standing of your account with us upon request of a third party, such as a credit bureau;
- c) to comply with a government agency or court orders;
- d) in accordance with your written permission;
- e) in order to comply with government or administrative agency summonses, subpoenas or orders; and
- f) on receipt or certification from a federal agency or department that a request for information is in compliance with the Right to Financial Privacy Act of 1978.

#### **14. Our Liability For Failure To Complete An Electronic Funds Transfer Transaction.**

If we fail to complete a transaction on time or in the correct amount, when properly instructed by you, we will be liable for damages caused by our failure unless:

- a) there are insufficient funds in your account to complete the transaction through no fault of ours;
- b) the funds in your account are unavailable;
- c) the funds in your account are subject to legal process;
- d) the transaction you request would exceed the funds in your account;
- e) the STAR ATM or PLUS SYSTEM ATM has insufficient cash to complete the transaction;
- f) your card has been reported lost or stolen and you are using the reported card;
- g) we have a reason to believe that the transaction requested is unauthorized;
- h) the failure is due to an equipment breakdown which you knew about when you started the transaction at the STAR ATM, PLUS SYSTEM ATM or Merchant terminal;
- i) the failure was caused by an act of God, fire or other catastrophe, or by an electrical or computer failure or by another cause beyond our control;
- j) you attempt to complete a transaction at a STAR ATM, PLUS SYSTEM ATM or Merchant terminal and it is not a permissible transaction listed above; or
- k) the transaction would exceed security limitations on the use of your STAR Card.

In any case, we shall only be liable for actual proven damages if the failure to make the transaction resulted from a bona fide error despite our procedures to avoid such errors.

#### **Protect Your ATM Transaction --And Yourself**

- Be alert to your surroundings. If you doubt the safety of a particular location, choose another ATM location.
- Close the entry door prior to initiating your transaction.
- Put your cash away immediately.
- If you have concerns about the security of an ATM location, call Rutgers Federal Credit Union at (732) 932-7645 or the New Jersey Department of Banking at (609) 292-7272.

#### **About Your STAR Card**

- Never lend your STAR Card to anybody.
- Protect the magnetic strip on the back of your card.

#### **About Your Personal Identification Number (PIN)**

- You will select your own PIN for your STAR/Debit MasterCard.
- A computer-generated PIN will be created and mailed to you for your STAR Card.
- Memorize your PIN. Do not write your PIN on your card.

**Have questions?** We will be happy to answer them. Just call (732) 932-7645.