

## Hill Bank and Trust Co. Debit MasterCard® Application.

Please list your account that will be associated with your Debit MasterCard®:

Checking: \_\_\_\_\_

*For Financial Institution Use Only*

Processed by \_\_\_\_\_

Date Processed \_\_\_\_\_

Date Approved \_\_\_\_\_

### Applicant.

| First Name | Mi | Last | Social Security No. | Date of Birth |
|------------|----|------|---------------------|---------------|
|            |    |      |                     | / /           |

| Address | City | State | Zip Code | Years at address |
|---------|------|-------|----------|------------------|
|         |      |       |          |                  |

| Home Phone | Business Phone | Cell Phone | Email Address |
|------------|----------------|------------|---------------|
| ( )        | ( )            | ( )        |               |

| Present Employer Or Business (if retired, list former) | Years at Business | Gross Monthly Salary |
|--|-------------------|----------------------|
|  |                   |                      |

| Source of Other Income | Amount | Frequency   |
|------------------------|--------|---|
|                        | \$     | <input type="checkbox"/> Annual<br><input type="checkbox"/> Monthly |

*Note: Income for alimony, child support or separate maintenance payment need not be revealed if you do not choose to disclose it as income.*

### Signature.

This information is given to obtain a Hill Bank and Trust Co. Debit MasterCard® and is true and complete. I authorize you to verify the information contained on this application and to obtain further information from a consumer credit report to assist in the review process. When I or someone I authorize uses the card, I agree to the terms and conditions of the disclosure that governs the use of the Hill Bank and Trust Co. Debit MasterCard®. I acknowledge receipt of a copy of the Regulation and disclosure attached to this application.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

**Please return application to Hill Bank & Trust Co. P.O. Box 157 Weimar, TX 78962**



# HILL BANK AND TRUST CO.

MEMBER FDIC

## NOTICE OF USER SAFETY AT ATMs

Hill Bank and Trust Co. attempts to ensure the safety for all of our valued customers at all times. Hill Bank has conducted a good faith evaluation of safety for our unmanned teller machine that we operate.

Hill Bank is providing this notice to provide you with the following basic safety precautions for all Unmanned Automated Teller Machines (ATMs):

- For outdoor terminals, be aware of your environmental surroundings and be cautious of weather conditions such as fog, rain, snow, or other similar conditions.
- Conduct your automated banking in a public, well-lighted location that is free of shrubbery and decorative partitions or dividers.
- Maintain an awareness of your surroundings throughout the entire transaction. Be aware of:
  - ❖ Anyone trying to help you with an ATM transaction.
  - ❖ Anyone trying to look over your shoulder as you enter your PIN.
  - ❖ Anyone sitting in a parked car nearby.
- When leaving an ATM make sure you are not being followed. If you are, drive immediately to a police station, or to a crowded, well-lighted location or business.
- If not using Hill Bank's ATM, do not use an ATM that appears unusual looking or offers options with which you are not familiar or comfortable with.
- Always memorize your PIN; never write it on the back of your card. Do not re-enter your PIN if the ATM takes your card, please contact Hill Bank.
- Never count your cash at the ATM or in public. Wait until you are in your car or another secure place.
- When using a drive-up ATM, keep your engine running, your doors locked and leave enough room to maneuver between your car and the one ahead of you in the drive-up line.
- Never leave an ATM receipt at an unmanned ATM.
- Closely monitor your bank statements, as well as your balances, and compare ATM receipts against your monthly statement. Immediately report any problems or discrepancies to Hill Bank.
- If you are unfortunately involved in any kind of confrontation with an assailant who demands your money, COMPLY.
- If you lose or have your debit card stolen from you, immediately contact Hill Bank.

**If you have any questions regarding ATM safety please contact us at 979-725-9575.**

# Debit Card Transaction Alerts

Name: \_\_\_\_\_

Account Number: \_\_\_\_\_

Debit Card Number: \_\_\_\_\_

*Please fill out both options below however please choose ONE option to receive the transaction alerts.*

\_\_\_\_\_ Email Address: \_\_\_\_\_

\_\_\_\_\_ Cell Phone Number With Area Code: \_\_\_\_\_

\_\_\_\_\_ Wireless Data Carrier: \_\_\_\_\_

***(PLEASE BE AWARE WHEN REQUESTING TEXT ALERTS YOU MAY ENCOUNTER A TEXT MESSAGE FEE FROM YOUR DATA PROVIDER. YOUR WIRELESS DATA CARRIER MAY NOT SUPPORT THIS PROGRAM THEREFORE YOU WILL BE ELIGIBLE TO RECEIVE EMAIL ALERTS ONLY.)***

*Other contact numbers (these numbers will NOT receive transaction alerts):*

\_\_\_\_\_

\_\_\_\_\_

Customer Signature

\_\_\_\_\_

Date

Please discontinue transaction alerts from my debit card.

\_\_\_\_\_

Customer Signature

\_\_\_\_\_

Date

## **Bank use Only:**

Device Email Address: \_\_\_\_\_

Maintenanced By: \_\_\_\_\_

Verified By: \_\_\_\_\_