



## Alliant Credit Union is there when you need us (24/7)

**Website and Online Banking**  
www.alliantcreditunion.org

**ATM Locator**  
www.alliantcreditunion.org

**Self Service Telephone (SST)**  
800-482-5328  
24/7 automated account access

**Member Contact Center**  
800-328-1935  
24/7 personal assistance  
TDD/TTY 773-462-2300



## savings account access anytime, anywhere

convenience card



Use your card to experience convenience and avoid waiting on hold or in line for routine withdrawals, deposits and balance inquiries from your savings account. The amount of your deposits or withdrawals will be automatically added or deducted from your savings account and detailed on your ATM receipt and account statement.

<sup>1</sup> Refer to the back of the Alliant Convenience Card for a list of networks. Transactions include balance inquiries, deposits and withdrawals only. Surcharge-free ATMs include Alliant-owned ATMs and ATMs that are part of the CO-OP Network, Credit Union 24 CU Here, Bank of the West, Allpoint and Alliance One networks. Transactions performed at other ATMs may be subject to the ATM owners surcharge fee. Not every Allpoint ATM is surcharge-free. Not all ATMs accept deposits. Please see our online ATM Locator for a list of ATMs that accept deposits or are surcharge-free.

<sup>2</sup> Members in good standing and without a ChexSystems record have a \$500 daily withdrawal limit and a \$10,000 daily deposit limit. Members with a ChexSystems record have a \$200 daily withdrawal limit and \$0 daily deposit limit. ChexSystems is a consumer reporting agency.

<sup>3</sup> Certain transactions from savings may be subject to limitations. Refer to the Electronic Funds Transfer section of the Alliant Account Agreement & Disclosure available at www.alliantcreditunion.org for terms and conditions.

Alliant Credit Union is owned and operated by its members. Membership is a lifetime benefit and is available to the employees, retirees and members of qualifying organizations and their family members and residents and workers in qualifying communities and their family members.

Alliant Credit Union is chartered in the state of Illinois and is supervised by the Illinois Department of Financial and Professional Regulation. This credit union is federally insured by the National Credit Union Administration.



P.O. Box 66945, 11545 W. Touhy Avenue  
Chicago, IL 60666-0945  
www.alliantcreditunion.org



SAVINGS ACCOUNT CONVENIENCE CARD ORDER FORM



# savings account access anytime, anywhere

The Convenience Card gives you secure access to your Alliant savings account at participating ATM networks worldwide.<sup>1,3</sup> You can use the card to:

- Withdraw up to \$500 per day from your Alliant savings account<sup>1,2,3</sup>
- Make deposits up to \$10,000 per day to your Alliant savings account<sup>1,2,3</sup>
- Enjoy unlimited free transactions at Alliant-owned ATMs<sup>3</sup>
- Perform transactions at over 80,000 surcharge-free ATMs nationwide and at other non-Alliant owned ATMs<sup>1,3</sup>

As a reminder, Alliant has free 24-hour account access to verify transactions and daily savings account balances through Alliant Online Banking at [www.alliantcreditunion.org](http://www.alliantcreditunion.org) and Self Service Telephone (SST), our toll-free automated telephone service at 800-482-5328.

## ORDER YOUR CONVENIENCE CARD TODAY.

It's easy to order an Alliant Convenience Card. Simply complete the attached Convenience Card Order Form and return it to Alliant Credit Union.

- Drop by your local Service Center
- Fax to Plastic Card Operations at 773-462-2007
- Mail to Alliant Credit Union  
Attn: Account Services  
P.O. Box 66945  
Chicago, IL 60666-0945

Once you receive your new Convenience Card you can activate it by following the easy instructions listed on the sticker affixed to the front of the card.

## CONVENIENCE CARD ORDER FORM

- Please print clearly in **black ink only** and **initial any changes** to this form.
- All fields must be completed unless noted.
- The Convenience Card is available to applicants age 12 and older.

### 1. Owner Information

Member Account Number—member who established the savings account (required to process)

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

Social Security Number/ITIN \_\_\_\_\_ Date of Birth \_\_\_\_\_

I would like to order additional Convenience Card(s) for the joint owners on my account. The joint owner(s) listed below must be the same as listed on your Membership Enrollment Agreement or Account Ownership Delete/Add Form in order to receive a Convenience Card.

### 2. Order additional card for existing Joint Owner(s) (Optional)

**IMPORTANT NOTICE:** Additional cards can only be ordered for existing joint owners on the account. If you would like to add a new joint owner to your account, please complete a Joint Owner Add/Delete Form available at [www.alliantcreditunion.org](http://www.alliantcreditunion.org). Once the joint owner is added to your account, you can order him/her a Convenience Card.

a) First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

Social Security Number/ITIN \_\_\_\_\_ Date of Birth \_\_\_\_\_

b) First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

Social Security Number/ITIN \_\_\_\_\_ Date of Birth \_\_\_\_\_

### 3. Signatures and Agreements (Required)

Member who established the savings account signature is required to authorize joint applicant(s) Convenience Card(s).

I/We, the undersigned, agree to the terms stated on this form, and I/we also agree to the terms stated in the separate Account Agreement & Disclosures booklet and Fee Schedule and acknowledge their receipt. I/We further acknowledge that a Convenience Card will be issued to the member who established the savings account. The member who established the account authorizes additional applicant(s), if any, access to member savings through Convenience Card transactions. **CONSUMER REPORT AGREEMENT:** I/We authorize Alliant to obtain information from a consumer reporting agency, now and in the future, in order to determine eligibility for the Convenience Card.

**X** \_\_\_\_\_ Date \_\_\_\_\_  
Account Owner (required)

**X** \_\_\_\_\_ Date \_\_\_\_\_  
Joint Owner Signature (required if applicable)

**X** \_\_\_\_\_ Date \_\_\_\_\_  
Joint Owner Signature (required if applicable)

*If Applicant is 12 – 17 years of age, the parent, grandparent or guardian must be a joint applicant on the savings account.*

Your new Convenience Card(s) will be mailed to the address on record for Applicant(s) under separate cover within 14 days. If you do not receive your card(s) within 14 days, please notify Alliant.

#### FOR OFFICE USE ONLY

1 Processing: Teller ID \_\_\_\_\_ Service Center/Dept. \_\_\_\_\_ Date \_\_\_\_\_

2 Verification: Reviewed by Teller ID \_\_\_\_\_ Date \_\_\_\_\_

3 ChexSystems: \_\_\_\_\_ SS# Issuance (Yr.) \_\_\_\_\_ (State) \_\_\_\_\_

4 Imaging: Forward to Document & Workflow  
(Steps 1 & 2 must be completed prior to Imaging.)

