

VISA® or MASTERCARD®
CREDIT CARD

Strong, Secure and Ready to Loan



On the Road to Financial Success

With a Visa® Classic or MasterCard® Standard Credit Card

Our cards offer:

- A low fixed rate
- A low annual fee
- Worldwide acceptance
- 24 Hour ATM cash access
- 24 Hour account information
- Online access to account

Visa® Benefits

- Zero Liability
- Emergency Card Replacement
- Travel Accident Insurance
- Warranty Manager Service
- Auto Rental Collision Damage Waiver

MasterCard® Benefits

- Zero Liability
- MasterCard® Global Service
- Emergency Card Replacement
- Identity Theft Protection

Four great ways to pay your bill - online, over-the-phone, auto-draft or mail.

Apply Today!

- Please print ALL PAGES of this document.
- Each applicant should complete the application and sign.
- The signed application should be mailed to:
The Bankers Bank Card Center
P.O. Box 548800
Oklahoma City, OK 73154-9962
or fax to: 405-810-2103
- Applicant should keep the **Important Disclosures** for the rates, fees and terms associated with this program.
- Applicant should keep this page as an overview.





FOR BANK USE ONLY		0020-1000
No. C	LC	Exp
APP By	Date	

- Choose Card** Visa Classic
 MasterCard Standard

- Choose Rate** 13.8% with \$15 Annual Fee
 14.8% with \$0 Annual Fee

10.8 % Balance Transfer Rate (This rate applies until the balances transferred are paid in full.)

APPLICANT INFORMATION					
First Name (Please Print)	Middle	Last	Date of Birth	Social Security Number	U.S. Citizen (Yes/No)
Present Street Address	City	State	Zip	How Long? Yrs. Mos.	Home Phone Number
Nearest Relative(Not living with you)	City	State	Zip	Home Phone Number	Relationship
Your Current Mailing Address	City	State	Zip		
EMPLOYMENT INFORMATION					
Employer Name	Address	City	State	Checking Accountg	Savings Account
Occupation/Position	Length of Employment/Yrs. Mos.	Monthly Income Before Taxes	Additional Income*	Source*	
Previous Employer (Even if Retired)	City	State	Occupation/Position	How Long? Yrs. Mos.	
If self-employed, please provide tax return.					
*Alimony, Child Support or Separate Maintenance Income need not be revealed if you do not wish to have it considered as a basis of paying this obligation.					
FINANCIAL INFORMATION					
Bank or Financial Institution	City	State	Zip		
Name of Mortgage Holder or Landlord	Own or Rent	Account Number	Monthly Payment	Balance	
CO-APPLICANT INFORMATION <i>Must be completed for Joint Account</i>					
First Name (Please Print)	Middle	Last	Date of Birth	Social Security Number	U.S. Citizen (Yes/No)
Present Street Address	City	State	Zip	How Long? Yrs. Mos.	Home Phone Number
Employer Name	Address	City	State	Zip	Business Phone Number
Occupation/Position	Length of Employment/Yrs. Mos.	Monthly Income Before Taxes	Additional Income*	Source*	
If self-employed, please provide tax return.					

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. To open an account, The Bankers Bank Card Center, a division of The Bankers Bank, will need your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documentation. The Bankers Bank Card Center may cause a credit investigation to be made concerning your character, general reputation, personal characteristics and creditworthiness from credit reporting agencies and other sources to be considered a part of this application. Revealing income from alimony, child support or maintenance payments is optional. Your account will be issued by The Bankers Bank and serviced by The Bankers Bank Card Center.

I certify that the above information is accurate and complete and is given for the purpose of obtaining the credit card described above. I authorize The Bankers Bank Card Center to check any of the references given above. If this is a joint application, the undersigned shall be jointly liable for any and all credit extended from time to time. A **Cardholder Agreement** and Disclosure will be mailed upon approval of this application.

We intend to apply for joint credit. Initials _____ and _____

X _____ Date _____ X _____ Date _____
 Applicant Signature Co-Applicant Signature

IMPORTANT DISCLOSURES

Interest Rates and Charges	
Annual Percentage Rate (APR) for Purchases and Cash Advances	Option 1: 13.8% Annual Fee \$15.00 Option 2: 14.8% Annual Fee None
APR for Balance Transfers	10.8% This rate applies until the balances transferred are paid in full.
How to Avoid Paying Interest on Purchases	Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on purchases if you pay your entire balance by the due date of each month.
Minimum Finance Charge	None
For Credit Card Tips from the Consumer Financial Protection Bureau	To learn more about factors to consider when applying for or using a credit card, visit the website of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore

Fees	
Annual Fee	Option 1: \$15.00 Option 2: None
Transaction Fees	
Cash Advance	Either \$2 or 2% of the amount of each cash advance, whichever is greater (maximum fee is \$20)
Balance Transfer	Either \$2 or 2% of the amount of each cash advance, whichever is greater (maximum fee is \$20)
Foreign Transaction	1% of each transaction in U.S. Dollars
Penalty Fees	
Late Payment	\$15
Returned Payment	\$10

How We Will Calculate Your Balance: We use a method called "Average Daily Balance (including new purchases)".

The information about the cost of the card described in this application is accurate as of the date in the lower right hand corner of the application. This information may have changed, call us at 1-800-511-0761.

The **Cardholder Agreement** should be reviewed for all conditions and terms.

The Bankers Bank is card issuer.