



## DEBIT CARD APPLICATION

First Name:

Last Name:

Submitted on:

In order to apply for a debit card for your account, please complete the form below.  
If your card has been lost or stolen, or if you have any questions about completing the application, please call our service center at (800)342-0679.

### GENERAL

Card Type

- ☐ New Card  
☐ Replacement Card (please include card number below)

16-digit card number for replacement

### APPLICANT

#### Applicant Information

Full Name

Name of Business

Social Security Number

Email Address

Address Line 1

Address Line 2

City

State

ZIP Code

Home Phone

Cell Phone

Work Phone

### LINKED ACCOUNTS

Checking Account Number

Savings Account Number

**AUTHORIZATION**

By my signature below, I am requesting a TrustTexas Bank, SSB Debit Card. I understand that my Debit Card will allow access to my bank accounts listed above. I understand to memorize my Personal Identification Number (PIN) and not to write the PIN where it can be stolen or lost with my Debit Card. I have received a copy of the liability disclosures concerning the use of my Debit Card. The Bank may obtain a current credit report upon receipt of this application. I agree to abide by the regulation terms and conditions established by TrustTexas Bank, SSB as related to the use of the Debit Card.  
By clicking below, you are agreeing to our [Terms and Conditions](#).

**Yes, I agree to the Terms and Conditions.**

☐

**Signature**

**Date**