



Reward Yourself with our FREE Checking & Savings Accounts

Kasasa Cash Checking

Earn interest and awesome rewards with a FREE Kasasa Cash checking account. You'll enjoy monthly payouts and NO minimum balance requirements – plus, we'll pay back your ATM fees nationwide!

Kasasa Cash Back Checking

Earn cash back on debit card purchases. What you buy is up to you, and we'll refund your ATM fees nationwide.

Kasasa Saver

Pair this extraordinary savings account with a Kasasa Cash or Cash Back checking account to make saving automatic. Any rewards you earn are deposited directly into your Kasasa Saver –so you can save without even thinking! Plus, you'll earn a great interest rate.

Members Choice Checking

This account features a variety of benefits, including travel rewards & discounts, identity theft protection, accidental death and dismemberment insurance, common carrier insurance, and much more – all for one low monthly service fee. For the full list of features, visit our website at MECUanywhere.com.

Simply Checking

With our Simply Checking account you'll never have to worry about paying a monthly service fee, but will still receive great benefits like FREE home banking, FREE bill pay, FREE e-statements, and FREE e-alerts – plus dividends!

Renew Checking

If you have experienced previous checking account challenges and have been denied a checking account in the past, our Renew Checking is ideal for you. For a low monthly fee, get back on track and Renew your checking account history with Members Exchange today!

*All checking accounts require a \$50 minimum opening deposit

Office Locations

Main Office

107 Marketridge Dr.
Ridgeland, MS 39157

Byram Branch

5640 I-55 S Frontage Road
Byram, MS 39272

Pearl Branch

101 MetroPlex Blvd.
Pearl, MS 39208

Mailing Address

P.O. Box 31049 • Jackson, MS 39286-1049

Contact Us

(601) 922-3350 • (800) 748-9459

Website

MECUanywhere.com

MECU Anywhere Account Access Line

1-877-370-MECU (6328)

Find Us On Social Media

@MECUanywhere



Choices in Checking

You're **ONE STEP** away from a great checking account!

One-Step Checking Application



Type of Checking Selected

- Kasasa Cash* Members Choice
 Kasasa Cash Back* Simply Checking
 Kasasa Tunes Renew Checking

*Kasasa Saver Account. When paired with Cash or Cash Back, rewards are deposited directly into your Kasasa Saver account!

- YES** - Please open a Kasasa Saver account
 NO - I do not wish to open a Kasasa Saver account

Types of Checks Selected

- I do not wish to order checks at this time.

Choice Checking:

- Burgundy Green Beige

Kasasa Checking, Simply Checking, or Renew Checking

Style: _____

Cost: \$ _____ Starting No. # _____

- I understand that the cost of the checks will be automatically debited from my checking account. If there are insufficient funds in my account at the time of payment, a NSF fee will be assessed and no refunds will be issued for this instance. I understand that the check order company (Harland) can attempt to draft my account 3 times.

Information to be Printed on Checks

(Please Print)

Name(s): _____

Street: _____

City: _____ State: _____ ZIP: _____

Address: _____

Phone: _____

Overdraft Protection

(Please make a selection below for share overdraft protection)

- YES** - Savings overdraft protection

Share/Loan ID: _____

- NO**

Signature: _____

Joint Owner Signature: _____

For Credit Union Use Only

MICR#: _____

PSR Initials: _____

Kasasa Rewards

In order to receive the Kasasa rewards, your Kasasa checking account must meet the required qualifications during the monthly qualification cycle. I understand that Members Exchange reserves the right to convert the Kasasa checking account to a different checking account if it does not meet the qualifications for three consecutive statement cycles. At that time, it will be converted to the Simply checking account.

Primary Member Signature

Date

Application for VISA® Check Card

(Please Print)

Name _____

Address _____

City _____ State _____ ZIP _____

S.S.# _____ Cell Ph. _____

Home Ph. _____ Work Ph. _____

Joint Owner: Another card can be issued in this person's name. This person must be joint on the checking account in order to receive a card.

Name _____

Address _____

(If different from Applicant)

City _____ State _____ ZIP _____

S.S.# _____ Cell Ph. _____

Home Ph. _____ Work Ph. _____

Signatures: By signing below, the undersigned request(s) the described services and agrees to the terms and conditions governing the services, including any fees and charges. The undersigned agree(s) that all information is accurate and authorizes the financial institution to verify credit and employment history by any necessary means, including preparation of a credit report by a credit reporting agency.

Primary Member Signature

Date

Joint Member Signature

Date

Select your own PIN number:

Member Number _____

Checking Acct. # _____

PSRs Name: _____



Members Exchange