



CREDIT CARD APPLICATION

(For data entry, use the tab key to conveniently move to data entry fields.)

Card Choice: MasterCard MasterCard Gold Credit Limit Requested: \$ _____ -
 Account Choice: Individual Account Joint Account - We intend to apply for joint credit. _____ (Initials) _____ (Initials)

APPLICANT Note: All applicable sections should be filled out completely. If not, processing of your Application may be delayed.

Last Name: _____ First: _____ Middle Initial: _____
 S.S.# _____ Date of Birth: _____ No. of Dependents: _____
 Home Phone: _____ Do you: Own Rent Other Monthly Payments: \$ _____ -
 Current Address: _____ City: _____ State: _____
 ZIP Code: _____ How many years have you lived here? _____
 Employer: _____ Are you self-employed? Yes No
 Work Phone: _____ How long (yrs): _____ Position/Occupation: _____
 Address: _____ Monthly Gross Income: \$ _____ -
 Name of Nearest Relative Not Living With You: _____
 Address: _____ Phone: _____

CO-APPLICANT Complete this section only if Co-Applicant or Spouse is applying for a joint account.

Last Name: _____ First: _____ Middle Initial: _____
 S.S.# _____ Date of Birth: _____ No. of Dependents: _____
 Home Phone: _____ Do you: Own Rent Other Monthly Payments: \$ _____ -
 Current Address: _____ City: _____ State: _____
 ZIP Code: _____ How many years have you lived here? _____
 Employer: _____ Are you self-employed? Yes No
 Work Phone: _____ How long (yrs): _____ Position/Occupation: _____
 Address: _____ Monthly Gross Income: \$ _____ -
 Name of Nearest Relative Not Living With You: _____
 Address: _____ Phone: _____

CREDIT DISCLOSURES

ANNUAL PERCENTAGE RATE		VARIABLE RATE INFORMATION	ANNUAL MEMBERSHIP FEE	GRACE PERIOD FOR PURCHASES
MASTERCARD	MASTERCARD GOLD	Your annual percentage rate may vary and is determined by adding 5.65% to MasterCard standard or 4.65% for MasterCard GOLD to the prime* rate as published in the Wall Street Journal.	NONE	You have 25 Days to repay your balance for purchases before you are charged a finance charge.
Prime Plus 5.65%, Currently 8.90%	Prime Plus 4.65%, Currently 7.90%			

Method of computing the balance for purchases is based on average daily balance including new purchases. Over the limit fee \$15.00. Cash Advance fee 2% or \$2.00. Late Payment Fee \$15.00. Minimum Finance Charge \$1.00. *Prime means the Prime Rate listed in the "Money Rate" section of the Wall Street Journal on the 15th day of March, June, September, and December. Any change in the rate will go into effect on the first day of your new Billing Cycle beginning after the 1st of April, July, October, and January, and may result in an increase or decrease in the Finance Charge imposed on your Account. A change in the interest rate may also result in an increase or decrease in your required minimum payment.

The information about the costs of the card described in this application is accurate as of July 1, 2009 (when it was published). This information may have changed after the date. To find out what may have changed, write to us at this address: **TrustBank, P.O. Box 158, Olney, IL 62450.**

No applicant may be denied a credit card on account of race, color, religion, national origin, ancestry, age (between 40 & 70), sex, marital status, physical or mental handicap unrelated to the ability to pay or unfavorable discharge from military service. The applicant may request the reason for rejection of his or her application for a credit card. No person need reapply for a credit card solely because of a change in marital status unless the change in marital status has caused deterioration in the person's financial position. A person may hold a credit card in any name permitted by law that he or she regularly uses and is generally known by, so long as no fraud is intended thereby. Amended by P.A. 81-1215.

SIGNATURE(S)

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: This statement is submitted to obtain credit and I/We certify that all information herein is true and complete. I/We agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of this institution. I/We agree to be bound by the terms and conditions of the bank card agreement, a copy of which will be mailed to the applicant if this application is granted, receipt of such agreement and acceptance of such terms to be conclusively presumed by the applicant's use. If this is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time.

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

Corp	Acct	Product	Type Proc	Card Type
Nm1 # Cd	Nm2 # Cd	Nm3 # Cd	Bill Code	CrAssoNm1
CrAssoNm2	CrAssoNm3	Clife	Afee (DdFee1)	Bill Day
Appr Cr Lmt	Type Appr	Src Cd	Date	FI Apprvl

