

ONLINE BANKING ENROLLMENT FORM

CUSTOMER INFORMATION

Name:		
Address:		SSN:
City:	State:	Zip:
Phone:		
Email Address:		

CHARGES

Stop Payments: \$20.00
Account to Charge:

USER INFORMATION : ACCESSIBLE ACCOUNTS

New Profile
 Change
 NetTeller ID: **985** _____
 Add New Feature
 Add Account
 Remove Account

Account Type:
 CH = Checking
 MMA = Money Market
 SAV = Savings
 CD = Certificate of Deposit
 I = IRA (View Only)
 L = Loan
 LOC = Line of Credit

Name	Account Number	Type	If View Only is selected, no other item may be selected.				
			View Only	Transfers	Download Account Information	Stop Payments	Bill Payment

SIGNATURES: By signing below, I hereby agree to abide by all the requirements as outlined in the Online Banking Services, Disclosure, and Agreement dated 1/25/2010.

 Signature
 Date
 Signature
 Date

BANK INFORMATION (To Be Completed By Bank)

<input type="checkbox"/> New	Date:	<input type="checkbox"/> Existing, since	Officer:	Branch:	User ID:
Additional Comments:					