

APPLICATION FOR INTERNET BANKING

To enroll for internet banking service please complete and sign this application and return it to the bank.

We must receive this signed application before we can process your request.

Social Security number (of first name on account) _____

Name _____
Please print

E-Mail Address _____
Please print

By signing below, I am applying for internet banking service. I authorize you to charge my account for any transactions made through use of the internet banking service, including the amount of any recurring payment or transfer that I make. I agree that sufficient funds must be available in my account on the date I schedule payments or transfers to be made using the internet banking service. I acknowledge receipt of the Internet Banking Agreement, that I understand the terms and conditions set forth therein, and agree to be bound by them.

Signature _____ Date _____

Signature _____ Date _____

Return this application by mail or in person to the Bank.