



Online Banking Application

PO Box 96, Mifflintown, PA 17059 • Ph: 717-436-2144 • Fax: 717-436-9891

Please complete, sign and return this form to any of our convenient branch locations or fax to the number above for processing.

We will process your request and email you a confirmation with a temporary password within 48 hours of receiving your application. You will use this password, in conjunction with your account number to login to Online Banking. The first time you log in, you will be required to create a unique Access ID and change your password as well as read and accept the agreement/initial disclosure for Online Banking.

1. Applicant

Name

Social Security No.

Mother's Maiden Name

Mailing Address

City, State & Zip

Daytime Phone

Evening Phone

2. Email Address

Valid email address provided below, I understand that I will receive my first time log on instructions via this email address.

Email Address *(required - please print clearly)*

3. Signature

I request access to the online banking product, and authorize my bank to honor any transaction(s) made using my Access ID and password.

X

Date

Financial Institution Use Only	Branch ID	
	Prepared by: Date:	
	Approved by: Date:	