



NEW PERSONAL ACCOUNT Setup Application

Choose your Personal Account Product

- First Free Checking
- First Checking
- First Checking Plus
- First Shareholder Checking
- First Senior Checking
- First Money Market
- First Savings
- First Student Savings
- First CD
- First Retirement (IRA)
- First In Health (Health Savings Account)

General Account Information

Individual Joint Trust Minor

Name of the signers on the account:

Please fill out the following information for each signer



NEW PERSONAL ACCOUNT Setup Application

Signer Information

Please print and fill out this form for each signer

Name: _____

Tax ID #: _____

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____

Home Phone Number: _____

Work Phone Number: _____

Birth City: _____

Mother's Maiden Name: _____

E-Mail Address: _____

Employer: _____

Occupation: _____

Primary Form of ID

Drivers License #: _____

Issued By State: _____ Issued Date: _____ Exp. Date: _____

Secondary Form of ID (*Credit Card, Military Card, Passport, etc.*)

Type of Card: _____ Card Number: _____

Issue Date: _____ Exp. Date: _____

In accordance with the USA Patriot Act, applications for new accounts are requested to provide current picture identification that verifies identity including date of birth, social security number or employer's identification number and other information that will allow us to identify you.

In some cases, identification will be requested for current account holders if original documentation was not obtained with the opening of the account. In all cases, protection of our customer's identity and confidentiality is our pledge to you. We proudly support all efforts to protect and maintain the security of our customers.