



Basic Savings Accounts at Merchants Bank

****A trusted adult is required to complete the below for all employees that are a minor*
(Not required if employee is 18 years or older)***

1. Customer Name (first) _____ (MI) ____ (last) _____

2. Physical Address: _____

City: _____ State _____ Zip _____

3. Mailing Address (If different from physical): _____

City: _____ State _____ Zip _____

4. Social Security Number: _____

5. Primary phone number: (____) _____

Secondary phone number: (____) _____

6. Date of birth: (MM/DD/YYYY) _____

7. Government Issued ID Number: _____

- Issue date: _____ Expiration date: _____
- State: _____

Please list above and provide a photo copy

8. E-mail address: (this is the e-mail you want to use for internet banking):

9. Preferred Internet Banking Username (at least 6 numbers and/or letter):
