

## COLONIAL CO-OPERATIVE BANK INTERNET BANKING ENROLLMENT FORM

Thank you for choosing Colonial Co-operative Bank as your Internet Banking provider. In order to get you on your way to making your banking even easier simply complete this form.

Once you have completed the form you may bring it into any one of our branch locations in Gardner, Winchendon, and/or Baldwinville. At the time of enrollment we will provide you with the necessary Internet Banking agreement and disclosures. After we have approved your application we will let you know within 2-4 business days to activate your account via phone or mail. For Business customers please contact Colonial Co-operative Bank at 978-632-0171 or 1-877-258-1193 and speak to a Customer Service Representative in our E-Banking Dept.

**Our web site is provided as a convenience to our customers. Colonial Co-operative Bank does not provide banking services outside its locally defined area but we do appreciate your interest.**

**If the account(s) designated for this service are joint accounts, both account owners must complete and sign this application.**

If you have any questions during this process please contact your local office or the Main Office at 978-632-0171.

**Account Holder #1  
Primary**

Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 E-mail \_\_\_\_\_  
 D.O.B \_\_\_\_\_  
 Social Security # \_\_\_\_\_

**Account Holder #2  
Secondary**

Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 E-mail \_\_\_\_\_  
 D.O.B \_\_\_\_\_  
 Social Security # \_\_\_\_\_

By signing below I authorize Colonial Co-operative Bank to set up the following accounts listed below. I realize if I am not the primary account holder I will not be able to auto enroll.

\_\_ I wish to sign up for E-Statements using the following valid e-mail address \_\_\_\_\_

Primary Account #'s	Primary Account #'s	Secondary Account #'s	Secondary Account #'s

Please notify Colonial Co-operative Bank with any changes to your name, address, e-mail address, and any additions or deletions related to Internet Banking or Bill Pay.

I/we have been provided and agree to the terms and conditions outlined in the Internet Banking Agreement, Internet Banking Help-Answering Your Questions, Your Deposit Account Disclosure with Fee Schedule, and Privacy Disclosure.

Signature: X \_\_\_\_\_

Signature: X \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_