

Account Information

Title: _____
 Surname: _____
 Other Name (s): _____
 Date of Birth: _____
 Address: _____

 Tel No: _____, _____, _____
 e-mail _____

Account Signature

Title of account: _____
 Account No: ____/____/____/____/____ Sign
 Title of account: _____
 Account NO: ____/____/____/____/____ Sign

UnityBank Delivery Channels (please indicate the means to receive the following items)

☞ **CARDS**
 Account Officer Registered mail Branch Pickup (please specify) _____
 ☞ **PIN**
 Pinmailer (please specify branch location) _____ email
 ☞ **ACCOUNT STATEMENT**
 Email Account Officer Branch Pickup (please specify) _____
 ☞ **ELECTRONIC NOTIFICATION**
 Email SMS Minimum Amount |

Subscribe to other electronic products (please tick appropriate box):

Internet Banking Telephone Banking ValueCard e-Transact payment Solution
 SMS Banking (please note that this involves any m-banking service offered by MTN, MTEL, Glo, Celtel, e.t.c)
 ATM Card

Declaration

I/we wish to apply for above selected UnityBank e-business products/services. Having read the terms of use governing the operation of the e-business products/services. I/we understand that the information given herein is the basis for granting access to UnityBank e-banking products/services. I/we also agree to be bound by the aforementioned terms of use and sign thus:

 Signature/Date

 Signature /Date

FOR OFFICIAL USE ONLY

Products: Type / Number	
e-tranzact:	[_____]
ATM:	[_____]
CSO:	_____
	Signature(s) verified by name/initials of officers
	Stamp/Date
OPM:	_____
	Signature(s) verified by name/initials of officers
	Stamp/Date
Approval:	_____
	Signature(s) verified by name/initials of officers
	Stamp/Date