

**UNITED MISSISSIPPI BANK
CONSUMER ONLINE SERVICES FORM**

DATE: _____ BRANCH: _____
CIF: _____
BY: _____
NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____
ZIP: _____
EMAIL ADDRESS: _____
HOME PHONE: _____ WORK PHONE: _____
SSN: _____ DOB: _____
ACCOUNT: _____

ADDITIONAL ACCOUNT NUMBERS: _____
TRANSFER AUTHORIZATION: YES / NO NEW ONLINE CUSTOMER: YES / NO

Agreement & Certification: I am an owner of the account (s) listed above and authorize United Mississippi Bank to activate these accounts for my access through UMB Online Banking. Prior to conducting any online transactions, I agree to access and read the UMB Online Banking Services Agreement, which can be found at unitedms.bank on the Agreements and Disclosures page under the Resources tab. I agree to accept and be bound by all its terms and conditions. I also agree to abide by United Mississippi Bank's rules and regulations as posted from time to time for online banking, in addition to other agreements I may have with United Mississippi Bank. If I believe my password security has been compromised, I agree to change my password and notify United Mississippi Bank.

Online Banking Service Fees: There is no charge for Basic Online Banking. A fee for Bill Pay service may be applicable, as referenced in the Miscellaneous Fee Schedule. Standard deposit account fees will apply, as disclosed in the Account Agreement and Applicable Disclosures.

CUSTOMER SIGNATURE: _____ DATE: _____



BANK USE ONLY

NETTELLER ID: _____
ENTERED BY: _____ DATE: _____ VERIFIED
BY: _____ DATE: _____