



Online Banking Application

To apply please complete the following information, print and mail the form below to:

Cumberland Valley National Bank
Attn: Call Center
PO Box 709
London, KY 40743-0709

We cannot accept enrollment via e-mail or fax. We require original signature(s) on the application form.

By signing below, you acknowledge our delivery to you of the Electronic Funds Transfer Disclosure. This Disclosure can be viewed or printed by clicking on **Electronic Funds Transfer Disclosure**. This Disclosure will further define your rights and responsibilities. If you don't have a printer, e-mail us at **cvnetcenter@cvnb.com** or call Customer Service at 1-800-999-3126 and we will send you a copy of the Disclosure.

Please designate below your accounts to be enrolled in Online Banking.

Example: Account Number: 0123456789; Account Type: Joint or Individual; Account Description: John's checking. You may use up to 20 characters. Do not use punctuation. Spaces can be used. The account description should be different for each account.

	Account Number	Account Type	Account Description	New/Add/Delete
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

PERSONAL INFORMATION

Owner #1

Full Name:	
Mailing Address:	
Social Security Number:	
Home Phone Number:	
Work Phone Number:	
Email Address:	
Date of Birth:	
Employer and Position:	

Owner #2

Full Name:	
Mailing Address:	
Social Security Number:	
Home Phone Number:	
Work Phone Number:	
Email Address:	
Date of Birth:	
Employer and Position:	

By signing below, you acknowledge that you have read the Online Banking Application and Agreement, including the User's Guides, Frequently Asked Questions (FAQ's) and the Electronic Fund Transfer Disclosure.

Signature 1: _____

Signature 2: _____