

MAIN BANK: 215 South Seth Child Road Manhattan, Kansas 66502-3089 (785) 323-1111

**EAST BANK:** 210 Tuttle Creek Boulevard Manhattan, Kansas 66502-6064 (785) 323-4200

## **E-BANKING APPLICATION** WWW.CFNB.BANK

ENROLLMENT INFORMAT	rion		
Name:			
Zip Code:		E-mail Address:	
characters and contain a r Your Username cannot co	minimum of 6 characters (alpha or ontain any spaces or special chara We will contact you if you choose	numeric or a combination or a combination of the co	Username must be in LOWER CASE on) with a maximum of 19 characters. & or "). Each Username for E-Banking ready been selected and you will be
Username (lower case only):			
To confirm your identity, if we may ask you which on		Services, provide an ansv	wer to ONE of the following questions that
(Select One)  ☐ What is the name of th ☐ What is your father's m		/hat was your high schoo vas your mother born?	ol mascot?  ☐ What month were you married?
Answer:			
Enroll in Bill Pay?	□Yes □ No		
Customer will also have to Services.	accept the terms and conditions	of the Bill Payment Servi	ice Agreement through the E-Banking
of my Username and my t Agreement. I acknowledg	use of E-Banking Services signi	fies agreement to the to y of this Agreement on	under this Agreement through the use erms and conditions set forth in this this date. The undersigned also eement disclosure.
Signature		Date	

For Bank use only: Portfolio #: Activated By:

Name Line: Activation Date:

Verified Signature By: