



NetTeller Enrollment Form

Print this form, complete and sign it and either mail, fax or drop it off at any Kentland Bank branch office. If faxed, the form with original signature must still be turned into the bank for processing.

Kentland
 P. O. Box 145
 Kentland, IN 47951
 (219) 474-5155
 (219) 474-5071 (fax)

Lafayette
 5 Executive Drive, Suite A
 Lafayette, IN 47905
 (765) 448-1300
 (765) 446-3800 (fax)

Lake Village
 P. O. Box 245
 Lake Village, IN 46349
 (219) 992-3313
 (219) 992-2501 (fax)

Rensselaer
 P. O. Box 164
 Rensselaer, In 47978
 (219) 866-4142
 (219) 866-4514 (fax)

Roselawn
 P. O. Box 304
 Roselawn, IN 46372
 (219) 345-4646
 (219) 345-2038 (fax)

 Personal

 Business

First Name: _____

Last Name: _____

City of Birth (Personal)/Security Identifier (Business): _____

Email: _____

SSN: _____

Address: _____

City: _____

STATE: _____ ZIP-Plus 4: _____

TELEPHONE: _____

List each Account Number and Account Type or Write ALL to add all your accounts:

<u>Account Number</u>	<u>Account Type</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Do you wish to apply for bill payer which may require additional approval?

YES

NO

SIGNATURE: _____ DATE: _____