



Digital Banking Enrolment Form

*Applicable for Individual customer only

Date:

D	D	M	M	Y	Y	Y	Y
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To sign up for IFIC Digital Banking all you need to fill up this form and submit to your nearest IFIC Bank Branch/Banking Booth. Please fill in the following information: (To be filled by Customer in CAPITAL LETTERS)

Customer Name (CAPITAL LETTERS)																									
Account Number																									
<input type="checkbox"/> Please link all of the Account(s) with IFIC Digital Banking, which has been associated with the Customer ID.																									

Credit Card Details (if any)																									
Credit Card Name	Credit Card Number																								
Supplementary Credit Card Name (if any)	Credit Card Number																								

Information Update																											
Mobile Number																			DOB	D	D	M	M	Y	Y	Y	Y
Email Address (CAPITAL LETTERS)																											
<i>Please write down your email address correctly and in BLOCK LETTERS. Bank will not bear any responsibility for any incident due to wrongly mentioned email address. (All secured information will be forwarded to this email address)</i>																											

Declaration:	Signature of the A/C Holder
I confirm that the information given above is complete and accurate. I also certify that the mobile number is registered in my personal NID. All other E-mail and mobile number records within IFIC Bank Limited shall be updated accordingly.	Signature of the A/C Holder

For Branch/Booth Use Only	Branch/Booth Code:	For Head Office Use Only
Name of Branch/Booth:		Customer has joint account: <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Joint Account is Status: <input type="checkbox"/> Enable <input type="checkbox"/> Disable
Initiated & Verified By (BBO/TSO/TSI) Sign with Date, EID & Seal Sign with Date, EID & Seal
Approved By (SBBO/BOM/BM) Sign with Date, EID & Seal Sign with Date, EID & Seal

