



**NetBank Application**

Unlock Code: 

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**Instructions:** Customers are required to complete the form (i.e. insert relevant information, and click buttons where applicable) print, sign and submit, along with a copy of valid identification to your RBTT Bank home branch. Our staff will process your application and contact you promptly with your username and password for access to the facilities. If you have any questions on how to complete this form, you can call our representatives at 1-800-271-7222.

Date:  
Branch: CHARLESTOWN

– Select –

**Demographics**

**Required fields \***

First Name\*: Middle Initial: Surname\*: Birth Date: Sex: – Select –  
 Address:  
 Identification\*: Contact Telephone No. \*: E-mail Address\*:  
 – Select – No.

**Account Information**

Account Number*	Account Type	Currency Type	Credit Card Account Number	Account Type	Currency Type

**Customer Agreement**

I, the undersigned, agree to be bound by the terms and conditions of RBTT Bank's Electronic Banking Agreement. A copy of this Agreement is available via RBTT's website rbtt.com or upon request from your branch. I have verified that the information entered above is true and accurate.

**Account Holder Signature**

Date:

In witness of this agreement:

Witness: .....  
(Name in Block Letters)

.....  
(Address)

Occupation: Bank Officer

.....  
Signature of Witness

**For Official Use Only**

Date Entered:                      Initials                      Date Verified:                      Initials:                      Tax ID No.:  
 .....                      .....                      .....                      .....                      .....