

National InterBank Banking Center

Apply Today! Simply fill out and sign the application below or visit us at www.nationalinterbank.com for more information and to check out today's rates.

Step ① Select Your Accounts

Account(s) Applied For: Free Checking Interest Checking CD CD 3 12 36
 High Yield Money Market Savings Money Market JUMBO Money Market Term 6 24 60

Step ② Fill Out The Application

Account Holder Name – Please Print Clearly	Date of Birth	Social Security Number
Address	Home Phone #	
	Business Phone #	
City, State, Country	E-mail Address	
	City of Birth	
	Mother's Maiden Name	
Joint Account Holder Name	Date of Birth	Social Security Number

Step ③ Sign/Mail In The Application

Consent Agreement: By signing below, I appoint Affinity Financial Corporation (AFC) as my Agent for the limited purpose of directing the funds from the account(s) I open through the Banking Center into an account at any of the FDIC insured Participating Banks and subject to the Terms & Conditions governing the account(s). I authorize and direct Sky Bank (the Bank) and any other Participating Bank to act in accordance with instructions given by AFC. I agree to accept the Terms & Conditions/Disclosures governing my account(s) and consent to receive these documents electronically at the time my account(s) is opened by the Bank. I understand that I may request a written copy of the Terms & Conditions be mailed to the address I have provided in my application. In connection with this application, I authorize the Bank to obtain my credit and employment history. **IRS W-9 Certification:** Under penalties of perjury, I certify that (1) the number shown on this form is my correct taxpayer identification (or I am waiting for a number to be issued to me), and (2) I am not subject to backup withholding, because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding, and (3) I am a US person (including a US resident alien). **Certification Instructions:** You must cross out item 2 above if the IRS has notified you that you are currently subject to backup withholding because of underreporting interest or dividends on your tax return. The IRS does not require your consent to any provision of this document other than certifications required to avoid backup withholding.

To help the government fight the funding of terrorism and money laundering activities, Federal Law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask you for your name, address, date of birth, and other information that will allow us to identify you.

 Please sign your name exactly as printed above Date Signature of Joint Account Holder Date

Please Mail To:

Deposit Operations
 Sky Bank / NIB
 PO Box 1245
 Indianapolis, IN. 46206-1245