

## **Eastern Connect Online/ Mobile Banking Registration Form**

Account Number		
Branch		
Member's Name		
Member's Address		
Telephone Contact	(H) (W)	
	(M)	
ID/DP/PP #		
Email Address		
Date of Birth		
Signature (Account Own	ner)	Date:
Which service are you s	igning up for?	
( ) Online	( ) Mobile	( ) Both
Upon submission of registration form, you will receive an email notification and supplied with a temporary password. At your first sign on you will be required to change your password which must contain a minimum of 6 and a maximum of 15 characters. Password must contain at least 3 of the following:  • Upper case letter (A, B, C		
Signature (ECU Represe	ntative)	Date:
Signature (Operations S	upervisor))	Date: