

**EASTWOOD BANK NEW HORIZONS CLUB APPLICATION**

Complete this membership form and mail, deliver, or fax it to any Eastwood Bank office.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

I authorize Eastwood Bank to publish my photo in the New Horizons Club newsletter.  Yes  No

**I would like information on the following:****Deposit Accounts:**

- Checking Accounts
- Savings Accounts
- Money Market Accounts
- Certificates of Deposit
- Individual Retirement Accounts

**Credit / Loan Services:**

- Visa™ Credit Card
- Ready Reserve
- Installment Loans
- Home Equity Loans
- Home Equity Lines of Credit
- Mortgage Loans

**E-Banking:**

- Internet Banking
- Online Bill Pay

**Financial Services**

- Trust Services
- Investment Services
- Insurance Services

**Convenience Banking:**

- Visa™ Check Card
- ATM Card
- 24 Hour Telephone Banking

**For Bank Use Only:**

Date \_\_\_\_\_ Qualifying Account \_\_\_\_\_

Account \_\_\_\_\_

#Authorized Signature \_\_\_\_\_

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