

Getting Started

Once you have completed and returned this application, you will receive a welcome letter with your Client Point Access ID. For your protection, a few days later we will mail your Password under separate cover. You will need both the Access ID and Password to access your account.

Security

Client Point is an Internet Banking service with built-in security features to assure your account information remains confidential.

- Your account information is encrypted when it travels between your computer and Client Point.
- You have the option to change your Password as often as you feel appropriate.
- Secure Sign On offers additional features to allow you to be sure you are connected to Client Point.

Online Statements

You can choose to view your statements online. No more paper or waiting for your statements to arrive in the mail. We'll email you when your statement is ready and you can simply view it on Client Point. You will also have the ability to print your statements or save a copy to your hard drive, CD, etc.

Questions or Comments?

Contact The Investor Group at TheBANK: 618/659-6242 or tig@4thebank.com

Please select the following services in which you would like to enroll:

Client Point Internet access to your account with The Investor Group at TheBANK – 24 hours a day, 7 days a week.

Electronic Document Delivery (Client Point access is required) I authorize TheBANK of Edwardsville to provide an electronic Statement on the account(s) listed below. I understand that I will no longer receive a paper copy of my Statement, and that on my Statement cycle TheBANK of Edwardsville will send me an email notifying me when it is available for viewing on Client Point, which can be accessed through www.4theinvestorgroup.com. I understand that I have the ability to retain a copy of my electronic Statement by printing it or saving a copy to my hard drive, CD, etc. I also understand that my electronic Statement will be available for viewing or download for a limited amount of time after the Statement cycle date and that it is my responsibility to notify TheBANK of Edwardsville of any changes to my email address. By submitting this form, I understand that I am obligated to review my Statement for errors or omissions.

I also authorize TheBANK of Edwardsville to provide an electronic Privacy Pledge and understand that I will no longer receive a copy of the Privacy Pledge in the mail. In addition, TheBANK may provide other correspondence or notifications electronically that may be required for these account(s).

To request a paper copy of your Statement or Privacy Pledge, to switch from electronic to paper documentation, or to update your email address, please contact The Investor Group at TheBANK at 618/659-6242 or at TIG@4TheBANK.com. You may receive a few more printed Statements and a Privacy Pledge before your electronic documentation delivery begins.

Applicant			Company Name		
First	M.I.	Last			
ddress					
			City	State	Zip
none Number			E-Mail Address		
ocial Security or Tax ID Numb	or (Applicant)			(Required for Online State	ment)
st of your accounts you w	ould like to acce	ess through Clie	nt Point		
count Number			Account Number		
ecount Number			/ CCOURT NUMBER		
count Number			Account Number		
you would like additiona	l parties to acces	ss your accounts	s, please provide us with the follo	wing information on ea	ch person:
you would like additiona ame First		ss your accounts	s, please provide us with the follo	wing information on ea	ch person:
ame First	M.I.	Last		wing information on ea	ch person:
nme First	M.I.	Last		wing information on ea	ch person:
First	M.I.	Last	City	State	Zip
First Iddress sone Number	M.I.	Last	City	State	Zip
First Iddress sone Number	M.I.	Last	City	State	Zip
First ddress none Number First	M.I.	Last	City	State	Zip
First Idress Ione Number First	M.I.	Last	City	State	Zip
First Idress one Number First Idress	M.I.	Last	City E-Mail Address	State	Zip
ame First ddress none Number	M.I.	Last	CityE-Mail Address	State	Zip