



# CLASSIC MEMBERSHIP APPLICATION

DATE

NAME

SPOUSE

PREFERRED NICKNAME

PREFERRED NICKNAME

BIRTHDATE

BIRTHDAY

ADDRESS

CITY

STATE

ZIP

HOME PHONE

EMAIL

WEDDING ANNIVERSARY

I (and/or my spouse) meet the age 50 requirement, hold a checking account and have the minimum \$10,000 in total deposits at Central Bank.

Signature \_\_\_\_\_

### CHECK APPLICABLE ACCOUNTS

- Checking
- CD
- Savings
- Money Market
- Safe Deposit Box
- IRA
- Other

### I WOULD LIKE TO HEAR MORE ABOUT

- Investment Management & Trust
- Money Market Account
- InvestorServices
- Certificates of Deposits
- Upcoming Seminars
- IRA
- Health Savings Account
- Online Banking
- eStatements
- Identity Theft

Complete this form and mail it to:

**CLASSIC**  
**Central Bank of Sedalia**  
**301 W. Broadway**  
**Sedalia, MO 65301**



## Central Bank

Strong roots. Endless possibilities.™

MEMBER FDIC