



Membership No. _____

Completed by: _____

Instructions:

Complete this form and return it to First National Bank of Germantown. Upon receipt we will process your enrollment and may contact you to confirm your enrollment. Feel free to contact us at 937-855-4151 if you have any questions.

ENROLLMENT			
Last Name	First Name		Middle Initial
Physical Address	City	State	Zip
Contact Phone Number	Email Address		

SELECT SERVICES		
Please select an Option (select only one)	<input type="checkbox"/> ID TheftSmart	<input type="checkbox"/> ID TheftSmart w/Credit Bureau Monitoring
Who is Covered	Individual	Individual
Services Provided	Identity Theft Counseling and Restoration	Identity Theft Counseling and Restoration Credit Bureau Monitoring
Services Include	Protection, Detection, and Restoration	Protection, Detection, and Restoration; and Notification of: New accounts opened, Payment delinquencies, Credit inquiries, Public record changes, and Change of address.
Cost to Customer	\$5 / Month Individual	\$10 / Month Individual
Minor Monitoring	<input type="checkbox"/> \$2 / Month Add-on (up to 4 minors)	<input type="checkbox"/> \$2 / Month Add-on (up to 4 minors)
Method of receiving notifications	Not Applicable	<input type="checkbox"/> Email <input type="checkbox"/> Standard Postal Mail

First National Bank of Germantown and its employees, agents, or any of its affiliated or related organizations disclaims all express or implied warranties or representations of any kind or nature whatsoever of its merchantability of the ID TheftSmart™ program provided by Kroll. You specifically agree, on your behalf and on behalf of your heirs, executors and assigns, not to bring any legal action in any federal or state court or other court of law or equity against First National Bank of Germantown or any of its affiliated or related organizations under any theory of liability and further agree to indemnify and hold First National Bank of Germantown and its affiliated or related organizations harmless. These Terms and Conditions and your access to the use and browsing of the credit monitoring site are governed by Ohio law without regard to its conflict of law provisions. First National Bank of Germantown may cancel your membership at any time due to non-payment. We will provide you with notification prior to cancellation. You may cancel membership to this program at any time by written notification to First National Bank of Germantown. You do understand that with your enrollment in a credit monitoring program the authentication of your identity is required before any alerts can be sent.

TO BE COMPLETED AND SUBMITTED BY CUSTOMERS OF FIRST NATIONAL BANK OF GERMANTOWN

I understand that First National Bank of Germantown will retain this form. I further understand that I am enrolling as an individual and that any other person related or affiliated to me must complete a separate enrollment. I acknowledge that the account listed below will be debited on a monthly basis for my enrollment in the plan I have chosen above. Finally, I understand that I may cancel my enrollment at any time by notifying First National Bank of Germantown in writing.

Account Number to Withdraw Fee From:

Account No. _____ Checking Savings

Signature	Date
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