



ENEDE MICRO FINANCE BANK LTD

OPPOSITE CHURCH OF GOD MISSION, IKOKOGBE QUARTERS, NSUKWA

ACCOUNT OPENING FORM

Affix/Passport
Photograph

Affix/Passport
Photograph

DATE:..... ACCOUNT TYPE:.....

NAME (SURNAME FIRST):.....

DATE AND PLACE OF BIRTH:.....

RESIDENTIAL ADDRESS:.....
OFFICE/SCHOOL OR BUSINESS

ADDRESS:.....

PERMANENT HOME

ADDRESS:.....

MOBILE PHONE NUMBER:.....

NEXT OF
KIN NAME:.....

ADDRESS OF NEXT OF KIN:.....

NEXT OF KIN'S PHONE NUMBER:.....

SIGNATURE OF CUSTOMER AND DATE:.....