

# e-Statement Sign Up

I hereby authorize Wadena State Bank to send my monthly bank statement via email to the address listed below. It is my responsibility to contact Wadena State Bank if my email address should change.

\_\_\_\_\_  
Name (primary name)

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Password (4-8 characters) *NOTE: This password will be used **only** to open the email attachment. Please select a password other than your Online Banking password and email password.*

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Account Number

*I understand that I am able to print my periodic statement and it's disclosures from the Wadena State Bank email. If I would like a printed statement at any time I may also request a copy from the bank. I am now waiving my right to receive a periodic statement via postal service mail.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## TO BE FILLED OUT BY BANK PERSONNEL

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\_\_\_\_/\_\_\_\_/20\_\_\_\_  
Date e-mailed

\_\_\_\_/\_\_\_\_/20\_\_\_\_  
Date e-Statement Activated

\_\_\_\_\_  
Bank Employee Name

\_\_\_\_/\_\_\_\_/20\_\_\_\_  
Debit Card Fee Waived

Member FDIC

Shared/Input Sheets File/e-statement sign up