

Account No

BVN:

1 Personal Information (Please check as appropriate) PLEASE COMPLETE IN CAPITAL LETTERS

Title: Mr. Mrs. Miss Others Surname: _____

First Name: _____ Other Names: _____

Marital Status Single Married Others (Specify) _____ Gender Male Female

Place of Birth Nationality (For Non Nigerians)

Mother's Maiden Name Resident Permit No.

Date of Birth Permit Issue Date Permit Expiry Date

Local Govt. Area State of Origin

Tax Identification Num(TIN) Religion

2 Contact Details PLEASE COMPLETE IN CAPITAL LETTERS

Residential Address: _____

City/ Town Local Govt. Area

State Mobile Number

Email Address

3 Means of Identification (Please check as appropriate) PLEASE COMPLETE IN CAPITAL LETTERS

National ID Card National Driver's Licence Intl Passport INEC Voter's Card

ID Number Issuance Date Expiry Date

4 Details of Next of Kin (Please check as appropriate) PLEASE COMPLETE IN CAPITAL LETTERS

Title: Mr. Mrs. Miss Others Surname: _____

First Name: _____ Other Names: _____

Date of Birth Gender Male Female Relationship

Mobile Number Email Address

Residential Address City/ Town Local Govt. Area State

5 Lifestyle and Other Personal Information (Please check as appropriate) PLEASE COMPLETE IN CAPITAL LETTERS

The information is required to enable us support your life aspiration, goals and investment needs

Hobby/ Recreational Activity/Sports Exercise Reading Writing Outdoors None Other Hobbies

Favourite Sports: Football Basketball Wrestling Lawn Tennis Golf Track & Field None

Other Sports: _____ Favourite Sport Team _____

Monthly Religious Obligation: Yes No Do you donate to Charity?: Yes No

Favourite News Media: Newspaper Television Radio Magazine None

Favourite Social Media Platform: Facebook Twitter Whatsapp Instagram Linkedin Others

Telecom Provider: MTN GLO 9mobile Airtel Do you have an Insurance Policy?: Yes No

Major Investment Area: Stock Bond T Bills Fixed Deposit Real Estate Others

How would you like to be engaged? Online Chat SMS Email

Customer Signature Date