

PEOPLES BANK

People you know. People you trust.

of WISCONSIN

***Name:**

***Address:**

***City:**

***State:** ***Zip Code:**

***Phone Number:**

***Email Address:**

***Mother's Maiden Name:**

***Date of Birth:**

***Primary Account Number:**

Optional ID Information:

Enroll in Peoples E-Pay: Yes No

*Required Field

Please complete the form above with all of the necessary information. When you are finished, print the form and mail it to:

**Peoples Bank of Wisconsin
Attn: Customer Service
PO Box 391
Hayward, WI 54843**