

NEW HSA ACCOUNTS

Account Owner Information

Need Copy of Valid Driver's License

Customer Name: _____

Current Address: _____

Social Security Number: _____ Date of Birth: _____

Current Phone Number: _____ Email Address: _____

Are you a current Two Rivers Bank & Trust Customer? Yes or No (Please Check One)

Is your medical plan: Self or Family (Please Check One)

If you have a family Plan, do you want an authorized signer? – Yes or No (Please Check One)

Authorized Signer Information (if applicable)

Need copy of Valid Driver's License

Customer Name: _____

Current Address: _____

Social Security Number: _____ Date of Birth: _____

Current Phone Number: _____ Email Address: _____

Authorized Signer Debit Card: Yes or No (Please Check One)

Authorized Signer Information (DEPENDENT CARD) (if applicable)

Need copy of Valid Driver's License

Customer Name: _____

Current Address: _____

Social Security Number: _____ Date of Birth: _____

Current Phone Number: _____ Email Address: _____

Authorized Signer Debit Card: Yes or No (Please Check One)

IF ADDITIONAL CARDS ARE NEEDED PLEASE ADD ADDITIONAL SHEET

NEW HSA ACCOUNTS

Would you like a beneficiary on the account? – Yes or No (Please Check One)

Beneficiary Information (If applicable)

Same as authorized signer? Yes or No (Please Check One) *If yes, you do not need to fill out this section.*

Beneficiary Name: _____

Beneficiary Address: _____

Social Security Number: _____ Date of Birth: _____

NEW HSA ACCOUNTS

As a new security feature for our customers, we ask that you have three security questions on your account for your security and protection.

Please choose three and write the answers next to the prompt for both HSA owner and Authorized Signer (in that order).

- **Account Password** (This option can be any word, phrase, or PIN)
- Favorite word
- Shoe Size
- Color of Bathroom Towels
- Favorite Author
- Favorite Singer
- Favorite Animal Sound
- Favorite Food
- First Car
- Favorite Artist
- Favorite Color
- Favorite Hobby
- Favorite Movie
- Favorite Teacher
- First Pet's Name
- Street you lived on in 3rd Grade
- Favorite Piece of Furniture
- Favorite Type of Tree
- Favorite Flower
- Favorite Fruit
- Favorite Vegetable
- Favorite Sandwich