

To be filled in BLOCK CAPITALS												
1	Customer Name <i>(Please underline Surname)</i>	Mr/ Mrs/ Ms/ Dr/ Prof/ Rev/ Ven										
		Country Code	9	4	Mobile Phone Number							
2	Mobile Number (GSM)											
3	Mailing/ Correspondence Address											
	<input type="checkbox"/> Residence <input type="checkbox"/> Office											
	<input type="checkbox"/> Parents <input type="checkbox"/> Other											
4	Other Contact Numbers											
5	E-Mail Address(if any)											
6	Date of Birth			/			/				(DD/MM/YYYY)	
7	Mothers Maiden Name											
8	Account Details (To be linked to SMS Banking)											
	Branch	A/C Code	Account Number (Please state the 15 digit Account No.)							A/C Type		
		01										
		02										
		03										
		04										
9	Seylan VISA Credit Card Number(s)	01										
		02										
	Seylan VISA Electron Card Number(s) – ATM CARD											
		Please Tick the relevant cage									(✓)	
10	ALERTS	Standing Order Reminder										
		Loan Instalment Reminder										
		VISA – Monthly Payment Reminder										
		VISA - Payment Alert		Value is Greater than LKR								
11	FUNDS TRANSFER BETWEEN OWN ACCOUNTS											
12	UTILITY BILL PAYMENTS	<i>(Please fill the attached annexure)</i>										
13	PHONE RE-LOAD											
<p><i>I/We acknowledge having read and understood the terms and conditions (available on www.eseylan.com and www.eseylanet.com/sms) subjected to Seylan SMS Banking Service and agree to abide by the terms and conditions laid down therein. I/ We confirm that the details given are true & correct. I/ We also agree to the deduction of LKR 250/= from my account as the annual subscription for this service.</i></p>												
14	SIGNATURE(S)	*	DATE SIGNED (dd/mm/yyyy)									
							/		/			
	1		2	3								
	NIC *											
For Branch use only						For E-Banking use only						
Signature Verified / Checked by						Data Captured by						
Authorised by (Branch Manager's Signature on rubber stamp)												