

Manasquan Bank

Account #

<input type="checkbox"/> Infinity Cash	<input type="checkbox"/> Infinity Cash With Saver
<input type="checkbox"/> Infinity Cash Back	<input type="checkbox"/> Infinity Cash Back With Saver

<input type="checkbox"/> Individual	<input type="checkbox"/> Joint
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Account Owner
Name _____
Address _____

Joint Owner
Name _____
Address _____

The undersigned hereby applies for an account with Manasquan Bank of the type designated above and certifies that the signature(s) appearing below is/are genuine signature(s) of the account, acknowledges receipt of the General Deposit Account Rules and Agreement and Disclosures for Privacy, Truth in Savings (Reg. DD), Funds Availability (Reg. CC) and Electronic Funds Transfer (Reg. E) and agrees to be bound by such terms as they are now in effect or may after be amended by the Board of Directors of the Bank. You are authorized to supply any endorsement for me on any check or any other instrument tendered for this account and you are hereby relieved of any liability in collection of items which are handled by you without negligence and you shall not be liable for the acts of your agents, sub-agents or others for any casualty. Withdrawals may not be made on account of such items until collected, and any amount not collected may be charged back to the account including expense incurred, and any other outside expense incurred relative to this account may be charged to it.

Signature 1 _____

Signature 2 _____