

Application Form

Online Banking Services

Need more information?



alrayanbank.co.uk



0800 4086 407

Mon to Fri: 9am–7pm Sat: 9am–1pm

Returning this form

It is important that you complete this application form in full to enable us to offer you Al Rayan Bank's Online Banking Services. Please complete in **BLOCK CAPITALS** and **black ink**. If you have any questions about this form, please call our Customer Services team on **0800 4086 407**.

Section 1 Personal details

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other (please state) <input style="width: 100px;" type="text"/>								
Full name	<input style="width: 100%; height: 20px;" type="text"/>								
Date of birth	<table border="1" style="border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">D</td><td style="width: 20px;">D</td><td style="width: 20px;">M</td><td style="width: 20px;">M</td><td style="width: 20px;">D</td><td style="width: 20px;">D</td><td style="width: 20px;">D</td><td style="width: 20px;">D</td> </tr> </table>	D	D	M	M	D	D	D	D
D	D	M	M	D	D	D	D		
Postcode	<input style="width: 100%; height: 20px;" type="text"/>								
Account number <small>(Your account number is the 8-digit number that appears on your statements; or 13 digits in the case of a Fixed Term Deposit Account)</small>	<input style="width: 100%; height: 20px;" type="text"/>								
If you are a new customer without an account number, please tick here	<input type="checkbox"/>								

Our security procedures require a valid email address and at least one of either your phone number or mobile number. This is to enable us to send you a verification code which will be required to set up or amend the details of payees online. Additionally, please indicate your preferred method of verification by ticking the relevant box.*

Home telephone number*	<input style="width: 100%; height: 20px;" type="text"/>
Mobile telephone number*	<input style="width: 100%; height: 20px;" type="text"/>
Email address*	<input style="width: 100%; height: 20px;" type="text"/>

Section 2

Signature

This is our application upon which we intend to rely. For your own benefit and protection, please take the time to carefully read a copy of our Consumer Banking Terms and Conditions. These documents are available on our website at www.alrayanbank.co.uk, in branch, or call our Customer Services team on the number above and copies will be sent to you. If you do not understand any points contained in these documents, please ask for further information.

I confirm that the information given is accurate and true to the best of my knowledge, and no information has been withheld that would affect the outcome of this application. I have read and agree to be bound by the Consumer Banking Terms and Conditions, and any other Special Conditions that may apply to other products and services I have access to with Al Rayan Bank PLC. For joint accounts(s) I hold, I confirm that all account holders have also agreed to be bound by the Consumer Banking Terms and Conditions, and any other Special Conditions that may apply.

Signature

Your signature must not go outside the box

Date:

D	D	M	M	Y	Y	Y	Y
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Al Rayan Bank PLC is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

Our firm reference number is 229148. Al Rayan Bank PLC is incorporated and registered in England and Wales. Registration No. 4483430.

Registered office: 44 Hans Crescent, Knightsbridge, London, SW1X 0LZ.