



NEW CLIENT CONTACT FORM AND REQUEST FOR ONLINE ACCESS

New Client Contact Information

Parish or Entity Name: _____

Parish or Entity Street Address: _____

Parish or Entity City, State, Zip: _____

Parish or Entity Phone: (_____) _____

Online Responsible Party Information

To obtain online access to your account(s), **please provide contact information for the person at your parish or entity who will be responsible for retrieving online information about your accounts.** Typically, this is the person responsible for the financial affairs of your parish/entity. The email address provided will receive all account-related communication from Argent (formerly TMI Trust Company), including notice of monthly statements.

Name: _____

Address: _____

City, State, Zip: _____

Email Address: _____

Phone Number: (_____) _____

This form requires the signatures of two of the following: Parish Treasurer, Parish Sr. Warden, Parish Jr. Warden, Parish Priest-in-Charge, Entity Executive Director, Entity President, Entity Treasurer

Signature: _____

Signature: _____

Name: _____

Name: _____

Title: _____

Title: _____

Date: _____

Date: _____