



# MDI INSTITUTIONAL MEMBERSHIP APPLICATION

Bank Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Chairman's Name: \_\_\_\_\_

President's Name: \_\_\_\_\_

CEO's Name: \_\_\_\_\_

Total Assets: \_\_\_\_\_ (in \$millions) As of (date): \_\_\_\_\_

Total Deposits: \_\_\_\_\_ (in \$millions) As of (date): \_\_\_\_\_

---

Minority Classification: \_\_\_\_\_ Number of Branches: \_\_\_\_\_

Date Bank Established: \_\_\_\_\_ Date Minority Classification Established: \_\_\_\_\_

Regulatory Agency: \_\_\_\_\_ Charter Number: \_\_\_\_\_

The following individuals are designated as the contact person(s) for the above-named bank:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

E-mail: \_\_\_\_\_

////////////////////////////////////

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

E-mail: \_\_\_\_\_