



ZENITH BANK (GHANA) LIMITED

Z-WOMAN REGISTRATION FORM

Name of Customer (as on account)

Surname:

Middle Name:

First Name:

Account Number:

Branch Name:

Occupation:

Z-Woman Plus

Z-Woman

Signature:

Date:

By signing off this registration form, I have agreed to be notified of any promotions, loyalty packages and all other programs pertaining to the Z-woman lifestyle product, via telephone, SMS or email. I also agree to all charges on the Z-woman plus product for platinum account holders.

ZENITH BANK - OFFICIAL USE

CSU Officer

Name:

Signature:

Date:

Branch Head/HOP

Name:

Signature:

Date:



A unique service dedicated to increasing financial inclusion, improving entrepreneurial skills and enhancing the lifestyle of the Zenith woman.