

Clubs and Associations Account Application

To: VM Building Society

We the undersigned persons confirm that we have established a club/association for the purpose stated in this application:

Section A: Particulars of Entity

NAME OF ENTITY:

TYPE OF ENTITY: CLUB CIVIC GROUP ASSOCIATION

Address of Entity:	STREET ADDRESS		
DISTRICT/CITY/TOWN	PARISH/STATE/PROVINCE/COUNTY	ZIP CODE/POSTAL CODE	COUNTRY
Mailing Address:	STREET ADDRESS		
DISTRICT/CITY/TOWN	PARISH/STATE/PROVINCE/COUNTY	ZIP CODE/POSTAL CODE	COUNTRY
Main Activities of Entity			

Section B: Particulars of the Officers

The officers responsible for the operation and management of the Entity are:

Names of Officers (List the names of the primary Officers)	Position/Title (State the position of the Officers)
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

Section C: Authority to Operate Account

That the Entity has resolved by its members at a meeting held on _____ day of _____ 20_____ to establish and operate an account with the Society. The following persons have been appointed as authorized officer(s) to operate the account. Particulars of the authorized officers are set out in the attached *Account for Signing Authority Form* and is hereby incorporated as part of this Resolution

Names of Officers (List the names of the primary Officers)	Position/Title (State the position of the Officers)
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

The officers shall operate the account upon the following signing authority:

Any one authorized Officer Any two authorized Officers All Other: _____

Section D: Proxy Appointment and Declaration

PROXY APPOINTMENT

The Entity hereby appoint the Chairman of the Board of Directors of the Society or any director or officer of the Society from time to time nominated by him as my Proxy to vote for me on my behalf at all meetings of the Society. This appointment shall remain valid and effective until revoked by me in accordance with the Rules of the Society.

Declarants

The Entity does not have a Taxpayer Identification Number and we confirm that we have received advice from the Tax that a taxpayer Identification number is not required for the Entity.

I hereby certify that all information in this Declaration is accurate and fairly represents the state of affairs of the Entity.

Dated the _____ day of _____ 20_____ .

Signature

I confirm the information recorded on this application is true and complete, and further confirm I have received the "Terms & Conditions" which governs the account.

President/Secretary/Vice President _____
Name Signature

President/Secretary/Vice President _____
Name Signature

Please affix company seal.

Justice of the Peace _____
Name Signature

Please affix company seal.

FOR INTERNAL USE ONLY		
CIF# (if existing member): _____	Branch: _____	
Customer Signature Verified By (Name): _____	Signature: _____	Date: _____
CUSTOMER TYPE: <input type="checkbox"/> VM Building Society Employee	<input type="checkbox"/> VM Subsidiary Employee	<input type="checkbox"/> VM Building Society Director
<input type="checkbox"/> PEP	<input type="checkbox"/> Other _____	
PEP/Other : Approved By (Name) _____	Signature _____	Date: _____
INTERNAL REFERENCE (EXISTING MEMBERS ONLY)	<input type="checkbox"/> Applicable	<input type="checkbox"/> Not Applicable
Name of Officer: _____	Signature: _____	Date: _____

CIF CHANGES:

Name of Approving Officer: _____ Signature: _____ Date: _____

Name of CSR: _____ Signature: _____ Date: _____

Entered By: _____ Signature: _____ Date: _____

Checked By: _____ Signature: _____ Date: _____