

New Account Application Form Individual

To: The Directors of the Victoria Mutual Building Society			
<input type="checkbox"/> I/We request that I/ we be admitted as members of the Society in respect of _____ shares. <input type="checkbox"/> I/We request to be admitted as depositor(s) of the Society.			
ACCOUNT INFORMATION	A/C#:	CURRENCY: <input type="checkbox"/> JA <input type="checkbox"/> US <input type="checkbox"/> CDN <input type="checkbox"/> GBP	
DATE OPENED:	PRODUCT TYPE:	INITIAL DEPOSIT:	RECEIPT NO:
LOCATION:	REFERENCE NO:	INTEREST DISPOSITION: <input type="checkbox"/> Capitalize <input type="checkbox"/> Transfer ____% of interest to A/C#	
NO OF APPLICANTS:		SEND MAIL <input type="checkbox"/> Yes <input type="checkbox"/> No	
PURPOSE OF ACCOUNT: <input type="checkbox"/> Business <input type="checkbox"/> Education <input type="checkbox"/> Savings <input type="checkbox"/> Home Ownership <input type="checkbox"/> Retirement <input type="checkbox"/> Other _____		SOURCE OF FUNDS: <input type="checkbox"/> Business <input type="checkbox"/> Inheritance <input type="checkbox"/> Sale of assets <input type="checkbox"/> Gift <input type="checkbox"/> Loan proceeds <input type="checkbox"/> Tax refund <input type="checkbox"/> Salary/wages <input type="checkbox"/> Other _____	
ACCOUNT MAILING ADDRESS _____ _____		EXPECTED MONTHLY DEPOSITS:	
		EXPECTED MONTHLY WITHDRAWALS:	
MANDATE OF PAYMENT:		MANDATE FOR PLEDGING FUNDS:	
ACCOUNT HOLDER #1:	CIF#:	RELATIONSHIP CODE:	
ACCOUNT HOLDER #2:	CIF#:	RELATIONSHIP CODE:	
ACCOUNT HOLDER #3:	CIF#:	RELATIONSHIP CODE:	
ACCOUNT HOLDER #4:	CIF#:	RELATIONSHIP CODE:	

PROXY APPOINTMENT

I/We 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.

ACKNOWLEDGEMENT

I/We confirm that the information given in this application is true and complete. I/We acknowledge receipt of the Terms and Conditions for this account. I/We agree to be bound by the Terms and Conditions governing the operation of this account and by the Rules of the Society.

Signature 1: _____

Verified by: _____

Signature 2: _____

Verified by: _____

Signature 3: _____

Verified by: _____

Signature 4: _____

Verified by: _____

Processed by: _____

Checked by: _____