

**Application Form and Declaration for Share Accounts
by Unincorporated Associations, Including Clubs, Charities,
Churches, Societies & other Groups or Bodies**



A Details

Name of Unincorporated body/assn: _____

Registered Address: _____

Postcode: _____

Charity Number (if applicable): _____

Telephone Number (Inc STD code) _____

B Resolution

1. The *(insert name of the governing body of the unincorporated body/assn)* _____ requests you to open/continue an account in its name.

2. We attach a copy of our rules/constitution.

3. We certify that the following resolutions were passed at the meeting of the *(insert 'Committee' or other governing body of the unincorporated body/assn and name)* _____

held on *(date)* _____ and have been entered in the minute book.

RESOLVED:

- (a) that the officers recorded below in section C request membership of the Society and have been given authority to open/continue the account;
- (b) that the officers recorded below in section C are collectively authorised to make withdrawals;
- (c) that Catholic Building Society may act on any instruction signed by all/any *(insert number)* _____ of the officers recorded below in section C;
- (d) that the officers recorded below are authorised to make and sign the declaration in section D. Furthermore the first-named signatory will be the representative joint holder under paragraph 7 of Schedule 2 to the Building Societies Act 1986 and will be entitled to receive notices of meetings and vote on resolutions, or in the election of Directors of Catholic Building Society.

C Officers

Officer One

Name: _____

Address: _____

Postcode: _____ Telephone Number (Inc STD code) _____

Official Position: _____

Signature: _____

Officer Two

Name: _____

Address: _____

Postcode: _____ Telephone Number (Inc STD code) _____

Official Position: _____

Signature: _____

Officer Three

Name: _____

Address: _____

Postcode: _____ Telephone Number (Inc STD code) _____

Official Position: _____

Signature: _____

Officer Four

Name: _____

Address: _____

Postcode: _____ Telephone Number (Inc STD code) _____

Official Position: _____

Signature: _____

D Withdrawal Notice period

We wish to apply the following notice period to withdrawals made from this account *(please tick appropriate box)*

Immediate

7 Days

28 Days

E Declaration

The persons named above in section C above declare:

On Behalf of *(insert name of unincorporated body/assn)* _____

We, the persons authorised in sections C and E above to open/continue the account, understand and agree that:

- (a) The Share Account General Conditions and other conditions which we have received shall apply to these accounts, together with the Society's Rules, a copy of which is available to us on request
- (b) You will rely on the information given on this form, which we confirm is true.
- (c) You have the right to decline our application
- (d) You will not disclose any information about us or our organisation's accounts to anyone else for any purpose without our consent, other than in the four exceptional cases permitted by law.
- (e) We understand that the Society may make credit reference enquiries and search the Electoral Role to confirm our identities and addresses in order to comply with UK and European Money Laundering Regulations.

Signatures:

Date:
