

Membership Number

Alteration to Signatories



Date: / /20

Membership Name: _____

Relates to the following Account(s):

S1 S5 S19 S26 S28 S29 S50 I A/cs _____

All signatories (new and existing) except those signatories being removed must sign in the New Signatories Box directly below:

New Signatories:			
Signatory's Name	Signature	Member Number	Operating Relationship

Method of Operation: Anyone 1 to sign All Parties to sign Other _____

Linked Facilities to be updated: (Member to complete relevant forms)

Chequing (all signatories MUST sign a new Cheque Account Specimen Form) Card(s) Internet

Phone Banking, access to all or nominated account holders: Member No: _____

Current Signing Authorities Updating Signatories: _____

Office Use Only			
<input type="checkbox"/> Signatories updated	<input type="checkbox"/> Cheque Specimen	<input type="checkbox"/> Cards	<input type="checkbox"/> IVR13/Netfast
Branch:	Operator Number:	MRO:	