

Gibraltar Savings Bank

Ordinary Deposit Account For Non-Profit Organisations Form

This Application Form is to be completed when opening an account for a Non-Profit Organisation. In each case the application will be subject to the approval of the Director, Gibraltar Savings Bank.

An account opened by a club or charity must be operated with at least two signatories, any two to sign for all transactions.

Supporting Documents

- All of the applicants must complete a Customer Information Form
- Signatory Mandate and certified copy of the Registration Certificate and/or relevant deed is required.

Complete ALL relevant sections of this form in BLOCK CAPITALS and in Black Ink

1. Details of the Organisation Please note that we will address all correspondence to the first signatory listed below. 1.2 - Authorised Signatories 1 1.1 - Organisational Details Client No: Forename Organisation Name Surname(s) **Organisation Address** Status in Organisation Date of Birth Country Postcode Correspondence Address 1.3 - Authorised Signatories 2 Bank Use Only (If different to Organisation Address) Client No: Forename Surname(s) Country Postcode Status in Organisation Description of Organisation Date of Birth 1.4 - Authorised Signatories 3 Bank Use Only Country of Registration Client No: Forename Registered Body Surname(s) Date of Registration Status in Organisation Date of Birth Registration Number 1.5 - Authorised Signatories 4 Registration Type Bank Use Only Client No: Forename Telephone (Please tick preferred contact method) Surname(s) Mobile Status in Organisation **Email** Date of Birth

Page 1

2. Account Details	
Other Active Gibraltar Savings Bank Ordinary Deposit Accounts What is the source of funds in respect to the initial funds deposited into the account?	Estimated expected level of monthly: Withdrawals Deposits What is the intended purpose of opening an Ordinary Deposit account with the Gibraltar Savings Bank.
3. Declaration	
I/we hereby declare that I/we wish to open an Ordinary Deposit account and confirm that the details provided	
are correct and complete. I/we have read and accepted the regulations and rules stipulated under the Gibraltar Savings Bank Act and Savings Bank (Ordinary Accounts) Rules (these are available online at www.gibraltarlaw. gov.gi). I/we understand that it is my/our responsibility and obligation to promptly notify the Gibraltar Savings Bank should there be any changes to the details supplied.	
Applicant 1	Applicant 2
Applicant 3	Applicant 4
4. Data Protection – How we use your Information	
We treat all the information you give us about you and others as private and confidential. We respect your right to privacy and understand the importance of protecting the personal information that we hold. See our privacy notice for full details – available at www.gibraltar.gov.gi under Treasury Department, Gibraltar Savings Bank or by calling us.	
For Bank Use Only	
COA Ref	Account Number
Client Number (If joint account)	Account Name (Max 30 characters)
(M. 20 I)	
Client Name (Max 30 characters)	

Checked by

Prepared by

Date