

Unincorporated Organization, Groups/Teams/Clubs Pre-Appointment Form

Thank you for choosing Servus Credit Union as a partner in your business banking journey. Let's get started!
In order to process your account opening we ask that you provide the information outlined below.

Section 1: Required Documents

To open a membership certain documentation and information is required prior to your appointment.
Additional documents will be completed at the time of opening.

Please Provide (where applicable)

- ☐ Copy of Bylaws
- ☐ List of Board of Directors (legal name)
- ☐ List of Officers (legal name, title and contact)
- ☐ Meeting minutes where a motion was passed authorizing the opening of bank account (Minutes must be signed by two members of the organization who will not be signing on the bank account)
- ☒ Charities Registration Number (N/A)
- ☒ Third Party information (name of individual, company or entity not named on the account as a Director, Officer or Owner but who may direct use of funds on deposit) (N/A)

We are required to verify the existence of your organization or club. If you do not have a formal structure as suggested by the documents listed, the following items may satisfy the requirement:

- ☒ ~~List of organization members or sports club roster of coaches and players (names and contact information)~~
- ☒ Team List - Coaches, Players, Parents
- ☒ ~~Copies of promotional/media brochures, marketing materials, official correspondence, posters etc.~~

— * provide with other documents

Section 2: Organization Information

Legal Name: DEVON MINOR HOCKEY ASSOCIATION

Business Phone Number:

Email Address:

Website: WWW.devonminorhockey.com

Nature/purpose of organization: Local Minor Hockey Association for young athletes in and around our community.

Mailing Address

Apt/Unit Number:

Street Address/PO Box: Suite 7, 20 HAVEN AVENUE

Province/State: DEVON, AB

Country: CANADA

Postal/Zip Code: T9G 2B9

Physical Address (if different from above)

(ASSOCIATION ADDRESS)

Apt/Unit Number:

Street Address: 6 SUPERIOR STREET

Province/State: DEVON, AB

Country: CANADA

Postal/Zip Code: T9G 1E8



Section 3: Signer Information

Provide the following personal information for each of the account signers. If the number of signers exceeds the lines available, please detail on the bottom of the form.

Each signer is required to attend the branch to provide identification and complete the required documentation. Minimum acceptable ID is government issued with a photo and signature.

Legal Name (first, middle, last)	Title in Organization	Contact (phone or email)

Please return this form to Servus prior to your appointment.

New memberships will not be active until all required documentation is obtained, executed and all signers have attended the branch.

