

Application to open a Savings Account - Association

Thank you for choosing to open an account with Kingdom Bank Ltd. Please write clearly and in capitals. Before completing the form and the Non-Personal Mandate form, please Read the General and Specific Terms and Conditions; if you do not have a set you can print one from www.kingdom.bank or call us on 0115 921 7260 and we will post one to you. Please also call us if you have any questions.

	Step 1 – Choose the account you want to open by ticking one of the following boxes				
No Notice Account	Promotion Code				
Gospel Partner Account					
Savings Bond	months				
tep 2 – Please complete the following details about the Association					
Full name of the Association					
Address of the Association					
Postcode					
Telephone number of the Associ	Telephone number of the Association				
Please enclose a certified copy of your constitution with this application, so we can verify the identity of your association					
step 3 – Please provide details	s of the Correspondent and all Officers				
We will address correspondence	e to this person at this address				
The Will diddiness corresponding	to this person of this cities ess.				
Mr Mrs	Miss Ms Other				
Mr Mrs Mrs Full forenames (personal names)	Miss Ms Other				
Full forenames (personal names)					
Full forenames (personal names) Surname (family name)					
Full forenames (personal names)					
Full forenames (personal names) Surname (family name)					
Full forenames (personal names) Surname (family name) Date of birth					
Full forenames (personal names) Surname (family name) Date of birth					
Full forenames (personal names) Surname (family name) Date of birth Address					

Chair of Committee / Officer			
Mr Mrs Miss	Ms	Other	
Full forenames (personal names)			
Surname (family name)			
Date of birth			
Address			
Post Code			
Daytime telephone number (including dial	ling code)		
E-mail address			
Officer			
Mr Mrs Miss	Ms	Other	
Full forenames (personal names)			
Surname (family name)			
Date of birth			
Address			
Post Code			
Daytime telephone number (including dial	ling code)		
E-mail address			
Officer			
Mr Mrs Miss	Ms	Other	
Full forenames (personal names)			
Surname (family name)			
Date of birth			
Address			
Post Code			
Daytime telephone number (including dial	ling code)		
E-mail address			

Please photocopy and continue on a separate sheet for additional officers

Step 4 – Please confirm who will operate the account

£1 - £999 £1,000 - £4,999 £5,000 - £24,999

£25,000+

We need to know who will be authorised to operate the account, so that we can respond to withdrawal requests and other instructions in accordance with your formal mandate. You will therefore need to complete a "Non-personal Mandate Form", which must be returned to us with this application form.

If any person control the space below.	ling your org	anisation has a	US Taxpayer Identification Number (TIN), please enter their name and TIN
Name			TIN
Name			TIN
Name			TIN
			nisation is resident for tax in a country other than the UK, please enter their
name and country of tax residence in the space below. Name			
Name			Country of Tax Residence
Name			Country of Tax Residence
Alternatively by sign purposes or is a US of		, you confirm th	hat no person controlling your organisation is resident outside of the UK for
o 5 – Please tell us	s about yo	ur initial de _l	posit to this account
We shall open the ac	count with £		
This will be by (plea	se tick the ap	propriate box):	•
Cheque (ple	ease make the	cheaue out to	'Kingdom Bank Ltd – association name')
		_	
I ransfer fro	m another Ba	ank/Building So	ociety (we will provide you with the details to arrange the transfer)
Transfer fro	m Kingdom	Bank Ltd Acco	unt number
Please tick t	this box, if af	ter this initial tr	ransaction you expect to make further deposits in excess of £30,000.00
6 – Expected leve	els of Acco	unt Activity	
o Empecica io	015 01 11000		
O1 As part of our ac	ecount monite	oring processes	please could you indicate the expected frequency of activity on this account
(Please indicate with		mg processes	preuse could you material the expected frequency of activity on ans account
	Deposits	Withdrawals	7
Weekly	2 Cp ositis	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Monthly			
Occasional (2 to 4)			
times per year			
Annually or less frequently			
Q2. What do you est	imate the lev	el of activity to	be in monetary terms? (Please indicate with a tick)
	Deposits	Withdrawals	
	Deposits	vv iuiui awais)

Step 7 – Interest instructions

Interest will be paid gross (without the deduction of tax)). The interest will be paid annually or at maturity, depending on the type of account opened.

Step 8 – Telephone Banking – please complete for ALL acc	ount types
Please provide details of the nominated account to which we will send Bank or Building Society name Account name Account number Sort Code	l withdrawals from your Account.
Step 9 – Other Products and Services	
From time to time we would like to tell you about our other products such as insurance companies. Any personal Information you provide in the process of enquiring/ arrin the strictest confidence. We will only use this for the purposes spec details to these third parties or any other companies for any other reas Please tell us whether we can contact you with this information by tic	ranging any of our other products and services is provided cified in your enquiry and we will never pass your persona son. eking this box
I am happy for you to retain my personal information to enable you tall the products and services you provide. Pleas	
If you have already provided your consent we will continue to rely on information.	this permission until you request us to stop sending you
My preferred method of contact is; Any Method or Post Email	Telephone Text Message
Please √ as appropriate	

Step 10 – Declaration on behalf of the Association

For your own benefit and protection, you should read carefully the information and terms contained in this application form, including the declaration below, and also the General and Specific Terms and Conditions relating to this account before signing this form. If you do not understand any point, please ask for further information or clarification.

8	ent or the Trustee Act 2000 (as the ca	7 ° ′
Savings Account or Savings Bond		with Kingdom Bank Ltd, and that Kingdom indate given by the Association Officers from
time to time.	istructions in accordance with the ma	indate given by the Association Officers from
	tract from the minutes of the Association	on Officers quorate meeting
held on		
If other wording is used in the minute	es. please send a signed extract, not the	full minutes, on headed paper with the Association
number clearly stated, signed by the		,
We understand that you will rely on true. We understand that you may de		pplication form, which we confirm is complete and
☐ In order to process your application	on, please tick this box to acknowledge	receipt of the FSCS information sheet.
Signed by the Chair Person of the Association		Date
Full name		
(
Signed by an Officer of the Association		Date
Full name		
Step 11 – Verification of identity		

It is necessary for us to verify the identity of the Association and the personal identity of all signatories. We normally use a variety of data sources to complete this including Credit Reference and Fraud Prevention Agencies as well as the Electoral Roll. The agencies will record the details of the search whether or not your application proceeds. If we are unable to confirm identity from these sources we will ask you to supply us with adequate proof of identity. The only exception to this may be if the Association or signatories have an account with us.

Step 12 - Please post this application form and mandate to Kingdom Bank at the address shown below'

Freepost Plus RLUT-UUHS-KRSA, Kingdom Bank Ltd, Ruddington Fields Business Park, Mere Way, Ruddington, Nottingham. NG11

Kingdom Bank Limited, Ruddington Fields Business Park, Mere Way, Ruddington, Nottingham, NG11 6JS, registered in England and Wales No. 04346834. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Our Financial Services Register number is 400972. The Financial Services Register can be viewed at http://register.fca.org.uk