

Unincorporated Organization: Meeting Minutes

1. Name and Purpose of Organization

Name of Organization:

Purpose of Organization:

Mailing Address:

Legal Address:

2. Signing Authority to Operate Accounts:

Please provide the following information for those who will have signing authorization on the accounts. **If you are new to WCU, you will be required to visit the branch to sign the required documents. If you are an existing member of WCU, we can send documents to you electronically.**

Authorized Signor 1

Name:

Position:

Occupation:

Phone number:

Birthdate:

Email:

Address:

Are you...

New to WCU:

Existing Member of WCU:

Must sign in person.

Would you like to sign electronically or in branch?

Via email or text:

Authorized Signor 2

Name:

Position:

Occupation:

Phone number:



info@weyburncu.ca \ weyburncu.ca

Birthdate:

Email:

Address:

Are you...

New to WCU:

Existing Member of WCU:

Must sign in person.

Would you like to sign
electronically or in branch?

Via email or text:

Authorized Signor 3

Name:

Position:

Occupation:

Phone number:

Birthdate:

Email:

Address:

Are you....

New to WCU:

Existing Member of WCU:

Must sign in person.

Would you like to sign
electronically or in branch?

Via email or text:

Authorized Signor 4

Name:

Position:

Occupation:

Phone number:

Birthdate:

Email:

Address:

Are you...

New to WCU:

Must sign in person.

Existing Member of WCU:

Would you like to sign
Electronically or in branch?

Via email or text?

3. **Products & Services:**

Please check off all the products and services required.

Chequing

Intended Use:

Savings

Intended Use:

Cheques

Quantity of Cheques:

Debit Card

Which authorized signors will require debit cards:

Online Banking

Which authorized signors will require Online Banking:

If using online banking/and or a debit card indicate name of authorized user (from signing authority listed above.) If the account is two to sign then two people must have online banking.

New Collabria Credit Card

Existing Collabria Credit Card

4. **Signatures Required to Complete Transactions:**

This sets out how many signors from the organization need to authorize withdrawals, bill payments, e-transfers, and other financial decisions at Weyburn Credit Union. Please determine if this account will be:

One to Sign:

Two to Sign:

All to Sign:

Other: Please Specify:



5. Board of Directors:

Please provide a list of the organization's current board of directors and their roles.

Name:

Position/Title:

6. Certification:

We certify that the above was approved by the decision makers of the Unincorporated Organization at a meeting on

(Where possible, this document should be signed by two board/committee members who will not be signors on this organization at the Weyburn Credit Union.)

Signature

Signature

Printed Name

Printed Name